Supplement to: Tiansheng Wang<sup>1</sup>, Jin-liern Hong<sup>1</sup>, Emily W Gower<sup>1</sup>, Virginia Pate<sup>1</sup>, Seema Garg<sup>2</sup>, John B Buse<sup>3</sup>, Til Stürmer<sup>1</sup>.Incretin-basedTherapies and Diabetic Retinopathy: Real World Evidence in Older US Adults.

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# Supplementary Table 1. Codes used for key covariates in this study.

Diabetes	ICD-9 Codes
Diabetes	250
Eye disease	ICD-9 Codes
Diabetic Retinopathy	362.01-362.07
Blindness and low vision	369
Age-related macular degeneration	362.50, 362.51, 362.52, 362.42, 362.43
Age-related macular degeneration that needs anti-VEGF treatment	362.50, 362.52, 362.42, 362.43
Glaucoma	365
Cataract	366
Retinal detachments and defects	361
Disorders of globe	360
Chorioretinal inflammation	363
disorder of the iris or ciliary body	364
Visual disturbance	368
Keratitis	370
Corneal disorders	371
Disorders of the conjunctiva	372
Inflammation of eyelid	373
Other disorder of eyelid	374
Disorder of lacrimal system	375
Disorder of orbit	376
Optic nerve disorder	377
Strabismus	378
Other disorders of eye	379
Procedures for diabetic retinopathy	CPT Codes
Intravitreal Injection	67028

Panretinal Photocoagulation	67228
Focal Laser	67210
Vitrectomy	67036, 67038, 67039, 67040, 67041, 67042
Drugs	HCPCS Codes
Triamcinolone	J3300, J3301, J3302, J3303
Dexamethasone	J7312, C9256
Flucinolone	J7313
Ranibizumab	J2778
Aflibercept	J0178, Q2046, C9291
Bevacizumab	J9035, C9257, Q2024
Unclassified/miscellaneous drug codes	J3490, J3590, C9399
Eye Exams/Diagnostic Testing	CPT Codes
Intermediate eye exam, new patient	92002
Intermediate eye exam, established patient	92012
Comprehensive eye exam, new patient	92004
Comprehensive eye exam, established patient	92014
eye exam with anesthesia, complete	92018
eye exam w/ anesthesia, limited	92019
Gonioscopy	92020
Optical coherence tomography	92134
Scanning computerized ophthalmic diagnostic imaging	92135
Ophthalmoscopy, extended w/ retinal drawing, initial	92225
Ophthalmoscopy, extended w/ retinal drawing, subsequent	92226
Fundus angioscopy	92230
Fluorescein angiography	92235
Indocyanine-green angiograpy	92240
Fundus photography	92250
Ophthalmoscopy/dynamometry	92260

B-scan ultrasonography	76512
Consult eye codes*	99241-45
Evaluation/Management for established patients involving eye exams*	99213-15
Evaluation/Management for new patients involving eye exams*	99203-05
Health Care Utilization	CPT codes
Hba1c test	83036, 86037, 3044F, 3045F, 3046F
Lipid test	80061, 83704, 3048F, 3049F, 3050F
Office/Outpatient visit, new patient	99201, 99202, 99203, 99204, 99205
Office/Outpatient visit, established patient	99211, 99212, 99213, 99214, 99215
Flu shot	G0008, G9141, G9142, G8108, 90470, 90471, 90660, 90663, 90658,
Emergency room visits	99281, 99282, 99283, 99284, 99295 or PLCSRVC code=23; or revenue center code=0450-0459 or 0981;
Health Care Utilization	ICD 9 codes
Flu shot	V0481, 9952

<sup>\*</sup>We required such codes to be submitted by ophthalmologists or optometrists (physician specialty code 18 or 41). Reference: Quigley HA, Cassard SD, Gower EW, et al. The **cost** of **glaucoma care provided** to **Medicare beneficiaries** from 2002 to 2009. Ophthalmology. 2013 Nov;120(11):2249-57. doi: 10.1016/j.ophtha.2013.04.027. Epub 2013 Jun 12.

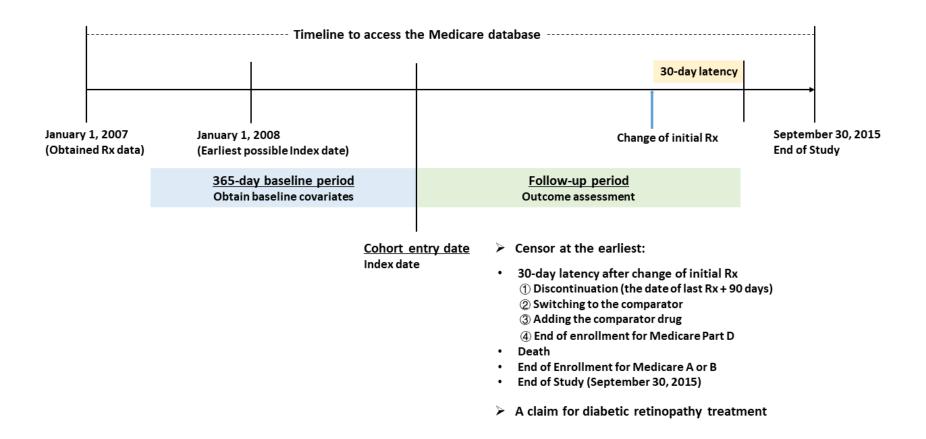
# Supplementary Table 2. Drugs may induce retinopathy<sup>1,2</sup>.

Drug	Adverse Event
Tamoxifen	retinal vein thrombosis; retinopathy
Quinine	blindness
Chloroquine	retinopathy; high dose or long-term use
Hydroxychloroquine	retinal damage with long-term use; retinopathy
Mefloquine	visual disturbance
Digoxin	visual disturbance
Ethambutol	optic neuritis: decrease acuity; blindness, irreversible
Peginterferon Alfa 2a	serious retinal detachment; vision loss or retinopathy, retinal vein thrombosis
Peginterferon Alfa 2b	vision loss or retinopathy, retinal vein thrombosis, retinal detachment
Interferon Alfa-2b	retinal hemorrhage
Interferon alfa n3	visual disturbance
Interferon alfacon 1	vision loss or retinopathy
Interferon Beta 1a	retinal vascular disorder: ie, retinopathy, cotton wool spots or obstruction of retinal artery or vein
Interferon Alfa 1b	retinal hemorrhage
Isocarboxazid	visual disturbance
Sildenafil	retinal hemorrhage, vission loss
Isotretinoin	visual disturbance
Vigabatrin	visual field defect
Fingolimod	macular edema
Docetaxel	macular edema
Niacin	macular edema
Latanoprost (Ophthalmic)	macular edema

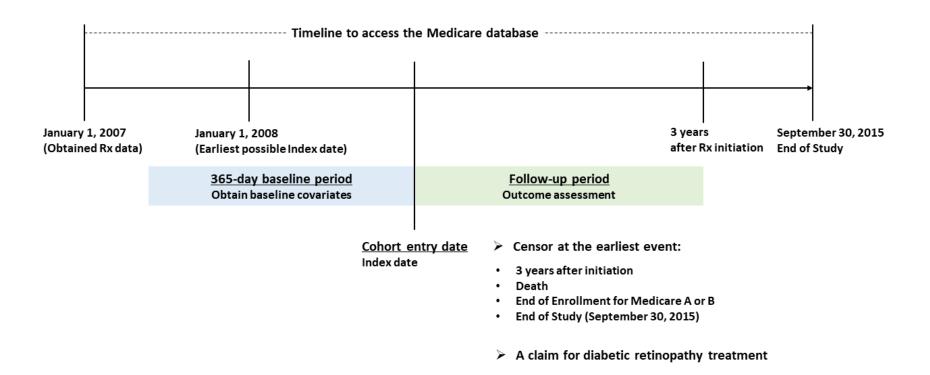
### Reference

- 1. Nencini C, Barberi L Fau, Micheli L, et al. Retinopathy induced by drugs and herbal medicines. Eur Rev Med Pharmacol Sci 2008; 12: 293-298
- 2. Makri OE, Georgalas I Fau, Georgakopoulos CD. Drug-induced macular edema. Drugs (2013) 73:789–802

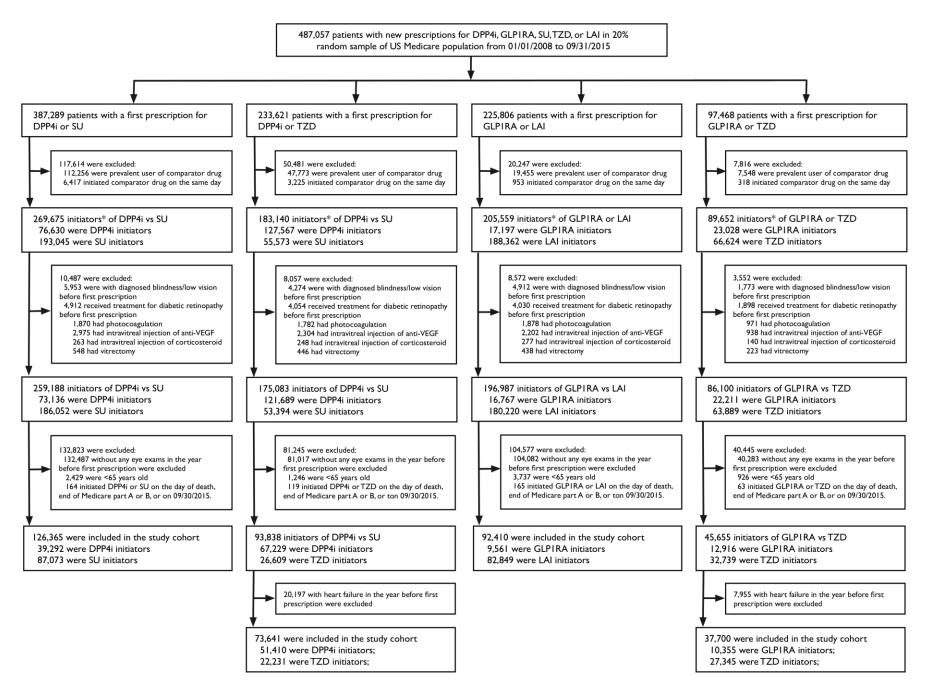
Supplementary Figure 1. Overview of study design and new user cohort for as treated analysis. Rx, prescription. Treatment discontinuation was defined as no refill within a period equal to the prescribed duration of the last filled prescription (Stopping) plus a grace period of 90 days for incretin-based therapies and their comparators, respectively. Switching is defined as discontinuing the current treatment and started filling the comparator drug. Augmenting is defined as a subsequent addition of a comparator drug. The eligible study population consisted of Medicare enrolees who were at least 65 years oldand had at least 12 months of continuous enrolment in Medicare parts A, B and D before initiation. New users were defined as the first dispensing of a prescription in a given drug class after a washout period of 12 months for this drug class.



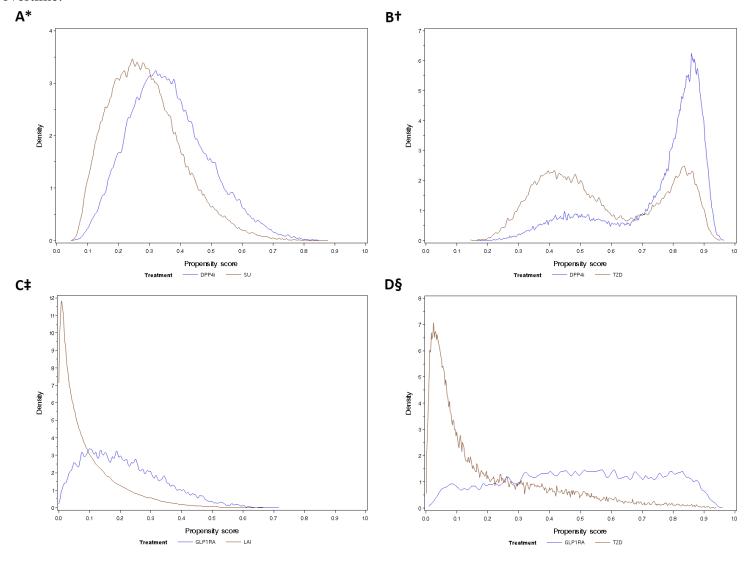
**Supplementary Figure 2. Overview of study design and new user cohort for initial treatment analysis.** Rx, prescription. The eligible study population consisted of Medicare enrolees who were at least 65 years oldand had at least 12 months of continuous enrolment in Medicare parts A, B and D before initiation. New users were defined as the first dispensing of a prescription in a given drug class after a washout period of 12 months for this drug class.



**Supplementary Figure 3. Number of Patients in the base cohort and study cohort.**DPP4i, DPP-4 inhibitor; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP1RA, GLP-1 receptor agonist; LAI, long acting insulin. Initiation defined as having no prescriptions of either drug class during the 12 months prior to initiation. A patient could be a new user of incretin-based therapies or comparator in different periods according to the 12-month washout period definition, thus could be selected in both incretin-based therapies and comparator cohorts in different periods.



**Supplementary Figure 4. Propensity score distribution.**DPP4i vs SU cohort (panel A); DPP4i vs TZD cohort (panel B); GLP1RA vs LAI cohort (panel C); GLP1RA vs TZD cohort (panel D).Abbreviations: DPP4i, DPP-4 inhibitor; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP, GLP-1 receptor agonist; LAI, long acting insulin. The "double peak" shape of plot for the propensity score distribution of TZD in DPP4i vs TZD comparison is mainly due to the calendar year dummy variables, i.e. a function of the increased use of DPP4i and decreased use of TZD overtime.



Supplementary Table 3. Patient characteristics of DPP-4 initiators and comparators\*.

			DPP4i vs SU					DPP4i vs TZD		
Characteristic	DPP4i (N†=39,292)	SU (N=87,073)	Unweighted Standardized Difference	Weighted SU (N=39,482)	Weighted Standardized Difference	DPP4i (N†=51,410)	TZD (N=22,231)	Unweighted Standardized Difference	Weighted TZD (N=51,450)	Weighted Standardize d Difference
Age, mean (SD)	76.5(7.01)	76.7(7.19)	0.034	76.4(6.99)	0.006	76.0(6.73)	75.4(6.51)	0.086	76.0(6.75)	0.000
Male, n (%)	15,461 (39.3%)	35,631 (40.9%)	0.032	15,504 (39.3%)	0.002	20,307 (39.5%)	9,262 (41.7%)	0.044	20,642 (40.1%)	0.013
Race, n (%)										
White	30,064 (76.5%)	69,824 (80.2%)	0.089	30,268 (76.7%)	0.004	39,951 (77.7%)	16,708 (75.2%)	0.060	40,663 (79.0%)	0.032
Black	4,081 (10.4%)	9,300 (10.7%)	0.010	4,066 (10.3%)	0.003	5,112 (9.9%)	2,301 (10.4%)	0.013	4,698 (9.1%)	0.028
Others	5,147 (13.1%)	7,949 (9.1%)	0.127	5,148 (13.0%)	0.002	6,347 (12.3%)	3,222 (14.5%)	0.063	6,089 (11.8%)	0.016
Calendar year of initiating, n										
(%)	2 200	0.055	0.450	2 205	0.000	0.555 (5.004)	4.004	0.440	0.54	0.000
2008	2,280 (5.8%)	9,077 (10.4%)	0.170	2,287 (5.8%)	0.000	2,557 (5.0%)	4,004 (18.0%)	0.418	2,561 (5.0%)	0.000
2009	3,065 (7.8%)	12,520 (14.4%)	0.211	3,057 (7.7%)	0.002	3,840 (7.5%)	5,200 (23.4%)	0.452	3,836 (7.5%)	0.000
2010	3,993 (10.2%)	11,933 (13.7%)	0.109	4,008 (10.2%)	0.000	4,925 (9.6%)	4,306 (19.4%)	0.281	4,921 (9.6%)	0.001
2011	6,039 (15.4%)	11,487 (13.2%)	0.062	6,072 (15.4%)	0.000	6,926 (13.5%)	2,454 (11.0%)	0.074	6,959 (13.5%)	0.002
2012	6,316 (16.1%)	10,774 (12.4%)	0.106	6,370 (16.1%)	0.002	7,888 (15.3%)	1,272 (5.7%)	0.317	7,843 (15.2%)	0.003
2013	5,605 (14.3%)	10,989 (12.6%)	0.048	5,623 (14.2%)	0.001	8,162 (15.9%)	1,556 (7.0%)	0.282	8,115 (15.8%)	0.003
2014	6,417 (16.3%)	11,221 (12.9%)	0.098	6,464 (16.4%)	0.001	9,243 (18.0%)	1,776 (8.0%)	0.301	9,307 (18.1%)	0.003

2015	5,577 (14.2%)	9,072 (10.4%)	0.115	5,601 (14.2%)	0.000	7,869 (15.3%)	1,663 (7.5%)	0.248	7,909 (15.4%)	0.002
Eye	,	, ,		, ,			,		, ,	
comorbidities,										
n (%)										
Retinopathy	4,555	8,156	0.073	4,594	0.001	6,094 (11.9%)	2,711	0.010	6,120	0.001
Reunopaury	(11.6%)	(9.4%)		(11.6%)			(12.2%)		(11.9%)	
Age-related	5,173	11,650	0.006	5,177	0.002	6,243 (12.1%)	2,479	0.031	6,135	0.007
macular	(13.2%)	(13.4%)		(13.1%)			(11.2%)		(11.9%)	
degeneration										
Retinal	562 (1.4%)	1,271	0.002	558 (1.4%)	0.001	708 (1.4%)	327 (1.5%)	0.008	710 (1.4%)	0.000
detachment		(1.5%)								
and defects										
Other retinal	6,671	13,434	0.042	6,656	0.003	8,229 (16.0%)	3,275	0.035	8,497	0.014
disorders	(17.0%)	(15.4%)		(16.9%)			(14.7%)		(16.5%)	
Cataract	20,852	47,001	0.018	20,884	0.003	27,721 (53.9%)	12,281	0.027	27,812	0.003
Cutaract	(53.1%)	(54.0%)		(52.9%)			(55.2%)		(54.1%)	
Glaucoma	11,470	23,446	0.050	11,454	0.004	14,646 (28.5%)	6,031	0.030	14,467	0.008
	(29.2%)	(26.9%)		(29.0%)			(27.1%)		(28.1%)	
Other eye	20,202	42,616	0.049	20,201	0.005	25,172 (49.0%)	10,144	0.067	25,078	0.004
diseases§	(51.4%)	(48.9%)		(51.2%)			(45.6%)		(48.7%)	
Diabetes										
comorbidities,										
n (%)										
Nephropathy	4,152	6,981	0.088	4,231	0.005	4,920 (9.6%)	1,784	0.055	4,997	0.005
	(10.6%)	(8.0%)		(10.7%)			(8.0%)		(9.7%)	
Neuropathy	9,359	16,053	0.132	9,497	0.006	11,646 (22.7%)	4,334	0.077	11,775	0.006
	(23.8%)	(18.4%)		(24.1%)			(19.5%)		(22.9%)	
Cardiovascul										
ar										
comorbidities,										
n (%)	26.220	70.170	0.047	26.420	0.002	47.216.(02.00)	10.050	0.070	47.051	0.007
Hypertension	36,239	79,172	0.047	36,430	0.002	47,316 (92.0%)	19,959	0.079	47,251	0.007
	(92.2%)	(90.9%)	0.140	(92.3%)	0.005	45 (00 (00 00))	(89.8%)	0.000	(91.8%)	0.010
Dyslipidemia	34,813	72,664	0.149	35,048	0.005	45,699 (88.9%)	19,107	0.089	45,930	0.012
	(88.6%)	(83.5%)	0.040	(88.8%)	0.001	17.042 (24.72)	(85.9%)	0.000	(89.3%)	0.002
Coronary	17,011	35,638	0.048	17,106	0.001	17,843 (34.7%)	6,881	0.080	17,777	0.003

artery disease	(43.3%)	(40.9%)		(43.3%)			(31.0%)		(34.6%)	
Cerebrovascul	9,814	20,423	0.036	9,854	0.000	10,517 (20.5%)	4,066	0.055	10,256	0.013
ar disease	(25.0%)	(23.5%)	0.030	(25.0%)	0.000	10,317 (20.370)	(18.3%)	0.033	(19.9%)	0.013
Peripheral	9,258	17,991	0.070	9,259	0.003	9,722 (18.9%)	3,644	0.066	9,535	0.010
vascular	(23.6%)	(20.7%)	0.070	(23.5%)	0.002	9,722 (10.970)	(16.4%)	0.000	(18.5%)	0.010
disease	(20.070)	(=0.7,0)		(20.070)			(101.70)		(10.070)	
Congestive	9,067	20,131	0.001	9,127	0.001				22.11	
Heart Failure	(23.1%)	(23.1%)		(23.1%)		NA	NA	NA	NA	NA
Other										
comorbidities,										
n (%)										
Chronic	8,264	19,171	0.024	8,271	0.002	7,186 (14.0%)	2,903	0.027	7,053	0.008
obstructive	(21.0%)	(22.0%)		(20.9%)			(13.1%)		(13.7%)	
pulmonary										
disease										
Depression	7,223	14,971	0.031	7,274	0.001	7,511 (14.6%)	2,839	0.054	7,429	0.005
1	(18.4%)	(17.2%)	0.002	(18.4%)	0.002	0.400 (40.50)	(12.8%)	0.050	(14.4%)	0.00#
Cancer	7,918	17,489	0.002	7,908	0.003	9,608 (18.7%)	3,660	0.058	9,723	0.005
Clare and	(20.2%)	(20.1%)	0.040	(20.0%)	0.001	10.070 (05.10()	(16.5%)	0.100	(18.9%)	0.002
Chronic	11,913	24,822	0.040	11,994	0.001	12,879 (25.1%)	4,640	0.100	12,949	0.003
kidney disease¶	(30.3%)	(28.5%)		(30.4%)			(20.9%)		(25.2%)	
Co-										
medications,										
n (%)										
, ,	25,399	49,479	0.161	25,782	0.014	37,162 (72.3%)	14,924	0.112	37,247	0.002
Metformin	(64.6%)	(56.8%)		(65.3%)		, , ,	(67.1%)		(72.4%)	
O.T.	NTAII	87,073	NTAII		NTAII	26,736 (52.0%)	12,047	0.044	27,086	0.013
SU	NA	(100.0%)	NA	NA	NA		(54.2%)		(52.6%)	
TZD	7,384	10,736	0.179	7,586	0.011	NA	22,231	NA	51,450	NA
IZD	(18.8%)	(12.3%)		(19.2%)		$ \mathbf{N}\mathbf{A}  $	(100.0%)	NA∥	(100.0%)	NA
DPP4i	39,292	NA	NA	NA	NA	51,410	NA	NA	NA	NA
D11+1	(100.0%)					(100.0%)				
GLP1RA	943 (2.4%)	1,480	0.049	991 (2.5%)	0.007	1,219 (2.4%)	623 (2.8%)	0.027	1,249	0.004
021 1101		(1.7%)							(2.4%)	
LAI	8,363	12,108	0.195	8,612	0.013	8,187 (15.9%)	3,355	0.023	8,282	0.005
	(21.3%)	(13.9%)		(21.8%)			(15.1%)		(16.1%)	

Alpha glucodase	225 (0.6%)	295 (0.3%)	0.035	234 (0.6%)	0.003	423 (0.8%)	170 (0.8%)	0.007	426 (0.8%)	0.001
inhibitor										
Meglitinide	1,819	2,207	0.113	1,906	0.009	1,548 (3.0%)	577 (2.6%)	0.025	1,681	0.015
	(4.6%)	(2.5%)	0.062	(4.8%)	0.001	24.076 (46.00()	11.020	0.055	(3.3%)	0.006
ACE inhibitors	17,133	40,642	0.062	17,242	0.001	24,076 (46.8%)	11,020	0.055	23,940	0.006
	(43.6%)	(46.7%)	0.400	(43.7%)			(49.6%)		(46.5%)	
ARBs	13,857	23,190	0.188	13,996	0.004	17,281 (33.6%)	6,293	0.115	17,227	0.003
	(35.3%)	(26.6%)		(35.4%)			(28.3%)		(33.5%)	
Beta-blockers	21,930	48,452	0.003	21,992	0.002	26,899 (52.3%)	10,351	0.115	26,867	0.002
	(55.8%)	(55.6%)		(55.7%)			(46.6%)		(52.2%)	
CCBs	15,060	32,393	0.023	15,101	0.002	19,400 (37.7%)	7,758	0.059	19,149	0.011
CCD <sub>3</sub>	(38.3%)	(37.2%)		(38.2%)			(34.9%)		(37.2%)	
Statins	28,536	56,987	0.156	28,741	0.004	37,329 (72.6%)	15,120	0.101	37,390	0.001
Statins	(72.6%)	(65.4%)		(72.8%)			(68.0%)		(72.7%)	
Loop diuretics	10,891	25,207	0.027	10,939	0.000	8,865 (17.2%)	3,290	0.067	9,099	0.012
Loop differences	(27.7%)	(28.9%)		(27.7%)			(14.8%)		(17.7%)	
Other diuretics	15,861	34,387	0.018	15,971	0.002	20,844 (40.5%)	8,764	0.023	20,802	0.002
Other diuretics	(40.4%)	(39.5%)		(40.5%)			(39.4%)		(40.4%)	
F 61	3,312	5,641	0.074	3,388	0.005	4,498 (8.7%)	1,675	0.044	4,585	0.006
Fenofibrate	(8.4%)	(6.5%)		(8.6%)			(7.5%)		(8.9%)	
Any drugs	7,983	17,846	0.004	8,030	0.001	8,762 (17.0%)	3,600	0.023	9,090	0.016
may induce	(20.3%)	(20.5%)		(20.3%)			(16.2%)		(17.7%)	
retinopathy or	, ,	, ,		, ,			, ,		` ,	
macular										
edema**										
Health care										
utilizations, n										
(%)										
No. of										
hyperglycemi										
a diagnosis										
Ü	20,302	51,432	0.149	20,248	0.008	25,128 (48.9%)	11,653	0.071	25,234	0.003
0	(51.7%)	(59.1%)	0.147	(51.3%)	0.000	23,120 (40.7/0)	(52.4%)	0.071	(49.0%)	0.003
	5,249	11,714	0.003	5,271	0.000	7,029 (13.7%)	2,902	0.018	7,035	0.000
1	(13.4%)	(13.5%)	0.003	(13.4%)	0.000	1,029 (13.170)	(13.1%)	0.010	(13.7%)	0.000
2	3,106	6,149	0.032	3,133	0.001	4,231 (8.2%)	1,711	0.020	4,157	0.006
2	3,100	0,149	0.032	3,133	0.001	4,231 (0.2%)	1,/11	0.020	4,137	0.000

≥3 No. of hospitalizatio	(7.9%) 10,635 (27.1%)	(7.1%) 17,778 (20.4%)	0.157	(7.9%) 10,830 (27.4%)	0.008	15,022 (29.2%)	(7.7%) 5,965 (26.8%)	0.053	(8.1%) 15,025 (29.2%)	0.000
ns due to diabetes										
0	38,627 (98.3%)	85,759 (98.5%)	0.015	38,810 (98.3%)	0.001	50,730 (98.7%)	21,991 (98.9%)	0.022	50,850 (98.8%)	0.014
1	592 (1.5%)	1,177 (1.4%)	0.013	595 (1.5%)	0.000	613 (1.2%)	221 (1.0%)	0.019	530 (1.0%)	0.015
≥2	73 (0.2%)	137 (0.2%)	0.007	77 (0.2%)	0.002	67 (0.1%)	19 (0.1%)	0.014	71 (0.1%)	0.002
No. of ED visit due to diabetes										
0	37,929 (96.5%)	84,164 (96.7%)	0.007	38,104 (96.5%)	0.001	49,715 (96.7%)	21,506 (96.7%)	0.002	49,804 (96.8%)	0.006
1	1,072 (2.7%)	2,417 (2.8%)	0.003	1,084 (2.7%)	0.001	1,388 (2.7%)	610 (2.7%)	0.003	1,351 (2.6%)	0.005
≥2	291 (0.7%)	492 (0.6%)	0.022	293 (0.7%)	0.000	307 (0.6%)	115 (0.5%)	0.011	295 (0.6%)	0.003
Physician encounters										
0	863 (2.2%)	2,813 (3.2%)	0.064	853 (2.2%)	0.002	935 (1.8%)	553 (2.5%)	0.046	853 (1.7%)	0.012
1-3	3,105 (7.9%)	9,546 (11.0%)	0.105	3,083 (7.8%)	0.003	4,088 (8.0%)	2,381 (10.7%)	0.095	4,030 (7.8%)	0.004
4-6	6,103 (15.5%)	15,914 (18.3%)	0.073	6,124 (15.5%)	0.001	9,183 (17.9%)	4,614 (20.8%)	0.073	9,197 (17.9%)	0.000
≥7	29,221 (74.4%)	58,800 (67.5%)	0.151	29,421 (74.5%)	0.003	37,204 (72.4%)	14,683 (66.0%)	0.137	37,370 (72.6%)	0.006
ED visit (any reason)										
0	23,382 (59.5%)	49,093 (56.4%)	0.063	23,475 (59.5%)	0.001	34,385 (66.9%)	15,311 (68.9%)	0.043	34,616 (67.3%)	0.008
1	7,396 (18.8%)	17,173 (19.7%)	0.023	7,454 (18.9%)	0.001	9,376 (18.2%)	3,908 (17.6%)	0.017	9,308 (18.1%)	0.004

≥2	8,514 (21.7%)	20,807 (23.9%)	0.053	8,553 (21.7%)	0.000	7,649 (14.9%)	3,012 (13.5%)	0.038	7,526 (14.6%)	0.007
Flu vaccine	24,181 (61.5%)	51,775 (59.5%)	0.043	24,306 (61.6%)	0.000	31,935 (62.1%)	12,989 (58.4%)	0.075	32,402 (63.0%)	0.018
Low income	16,130	31,169	0.108	16,117	0.005	18,562 (36.1%)	8,598	0.053	17,360	0.050
subsidy	(41.1%)	(35.8%)		(40.8%)			(38.7%)		(33.7%)	
Lab results#										
$HbA1c\dagger\dagger$										
<7%	17,155(43.6	38,589(44.	0.019	17,175(43.	0.003	17,024(33.1%)	7,863(35.4	0.048	16,976(33.	0.004
(53mmol/mol)	%)	3%)		5%)			%)		0%)	
7-9% (53-75	15,078(38.4	32,919(37.	0.019	15,186(38.	0.002	24,629(47.9%)	10,080(45.	0.052	24,811(48.	0.007
mmol/mol)	%)	8%)		5%)			3%)		2%)	
>9%	7,059(18.0%	15,565(17.	0.012	7,124(18.1	0.002	9,758(19.0%)	4,288(19.3	0.022	9,691(18.8	0.006
(75mmol/mol)	)	9%)		%)			%)		%)	
$SBP\dagger\dagger$										
<130 mmHg	15,654(39.8 %)	<i>31,962(36.</i> 7%)	0.065	15,730(39. 8%)	0.001	20,011(38.9%)	7,332(33.0 %)	0.124	20,238(39. 3%)	0.009
130-139	11,065(28.2	25,159(28.	0.020	11,124(28.	0.001	14,289(27.8%)	6,746(30.3	0.058	14,258(27.	0.005
mmHg	%)	9%)	0.020	2%)	0.001	11,207(27.070)	%)	0.020	7%)	0.002
	12,573(32.0	29,952(34.	0.057	12,631(32.	0.001	17,110(33.3%)	8,153(36.7	0.073	16,981(33.	0.006
>=140 mmHg	%)	4%)		0%)			%)		0%)	
$DBP\dagger\dagger$										
	24,971(63.5	55,020(63.	0.021	25,100(63.	0.001	31,118(60.5%)	13,521(60.	0.027	31,251(60.	0.005
<80 mmHg	%)	2%)		6%)			8%)		7%)	
00.00	11,312(28.8	26,097(30.	0.031	11,366(28.	0.001	15,912(30.9%)	6,752(30.4	0.025	15,914(30.	0.004
80-89 mmHg	%)	0%)		8%)			%)		9%)	
> =00 mmH2	3,010(7.7%)	5,956(	0.036	3,019(7.7%	0.002	4,381(8.5%)	1,958(8.8%	0.026	4,312(8.4%	0.007
>=90 mmHg		6.8%)		)			)		)	
<i>LDL-C</i> ††										
<100 mg/dl	29,116(74.1 %)	<i>63</i> ,202(72. <i>6%</i> )	0.036	29,262(74. 1%)	0.001	37,028(72.0%)	15,740(70. 8%)	0.028	<i>37,216(72. 3%)</i>	0.007
	6,539(16.6%	<i>14,478(16.</i>	0.020	6,575(16.7	0.001	8,842(17.2%)	4,000(18.0	0.028	8,824(17.1	0.006
100-129 mg/dl	)	6%)		%)		-,- :=(-::=/0)	%)		%)	
100	3,638(9.3%)	9,394(10.8	0.051	3,648(9.2%	0.001	5,540(10.8%)	2,491(11.2	0.030	5,437(10.6	0.007
≥130 mg/dl	, , ,	%)		)			%)		%)	

Abbreviations: No, number; DPP4i, dipeptidyl peptidase-4 inhibitors; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP1RA, Glucagon-like peptide-1 receptor agonist; LAI, long acting insulin; ACE inhibitors, Angiotension-converting enzyme inhibitors; ARB, angiotension receptor blockers; CCBs, calcium-channel blockers; ED, emergency department; NA, not applicable. HbA1c, hemoglobin A1c; SBP, systolic blood pressure; DBP, diastolic blood pressure; LDL-C, low-density lipoprotein cholesterol; NTSR: numbers too small (<11) to report based on Center for Medicare and Medicaid Services (CMS) rules and data use agreement.

\*The comparisons were defined by use of IBT and PS-weighted comparator. Covariates were measured in 12 months before cohort entry including the index date (New users appear to 100% have the treatment at baseline). Initiation defined as having no prescriptions of either drug class during the 12 months prior to initiation.

† The size of the population for a specific drug differed across cohorts because of the requirement not to have been treated prior to index date with the comparator drug class (Figure S1).

‡Weighted by standardizing to their distribution in incretin-based therapy initiators by using weights of one for incretin-based therapy initiators and the odds of the estimated propensity score for comparator initiators.

§Other eye disease included disorders of globe (ICD-9-CM 360), chorioretinal inflammation (ICD-9-CM 363), disorder of the iris or ciliary body (ICD-9-CM 364), visual disturbance (ICD-9-CM 368), keratitis (ICD-9-CM 370), corneal disorders (ICD-9-CM 371), disorders of the conjunctiva (ICD-9-CM 372), inflammation of eyelid (ICD-9-CM 373), other disorder of eyelid (ICD-9-CM 374), disorder of lacrimal system (ICD-9-CM 375), disorder of orbit (ICD-9-CM 376), optic nerve disorder (ICD-9-CM 377), strabismus (ICD-9-CM 378), and other disorders of eye (ICD-9-CM 379).

||Patients with congestive baseline heart failure were excluded for GLP1RA vs TZD and DPP4i vs TZD comparison; and patients are required not to have been treated prior to index date with the comparator drug class.

- ¶ Diabetic nephropathy codes (250.40-250.43) were not included to identify chronic kidney disease (ICD-9-CM codes: 016.0; 095.4; 189.0; 189.9; 223.0; 236.91; 271.4; 274.1; 283.11; 403; 404; 440.1; 442.1; 572.4; 581-588; 591; 753.12-753.19; 753.2; 794.4).
- \*\* Drugs may induce diabetic retinopathy or macular edema included tamoxifen, quinine, chloroquine, hydroxychloroquine, mefloquine, digoxin, ethambutol, peginterferonalfa 2a, peginterferonalfa 2b, interferon alfa-2b, interferon alfa n3, interferon alfacon 1, interferon beta 1a, interferon alfa 1b, isocarboxazid, sildenafil, isotretinoin, vigabatrin, fingolimod, doxetaxel, niacin, and latanoprost (ophthalmic).

#Based on the measure closest to index date.

††For clinical measures, the distribution of covariates and standardized difference were the mean of results from multiple imputation (20 iterations) as each iteration produces different number of patients with each level of clinical measure, e.g.HbA1c <7% (53mmol/mol), 7-9% (53-75mmol/mol), >9% (75mmol/mol). Availability and distribution of clinical measures were shown in Table 1.

Supplementary Table 4. Patient characteristics of GLP-1 receptor agonist initiators and comparators\*.

			GLP1RA vs LA	I		GLP1RA vs TZD						
Characteristic	GLP1RA (N†=9,561)	LAI (N=82,849)	Unweighted Standardized Difference	Weighted LAI (N=9,595)	Weighted Standardized Difference	GLP1RA (N†=10,355)	TZD (N=27,345)	Unweighted Standardized Difference	Weighted TZD (N=10,768)	Weighted Standardize d Difference		
Age, mean (SD)	73.0(5.17)	76.9(7.49)	0.609	73.0(5.18)	0.003	72.7(5.01)	75.5(6.51)	0.480	72.5(5.01)	0.035		
Male, n (%)	3,970 (41.5%)	35,069 (42.3%)	0.016	3,986 (41.5%)	0.000	4,018 (38.8%)	11,424 (41.8%)	0.061	4,242 (39.4%)	0.012		
Race, n (%)												
White	8,279 (86.6%)	64,568 (77.9%)	0.228	8,304 (86.5%)	0.001	8,809 (85.1%)	20,234 (74.0%)	0.277	9,294 (86.3%)	0.035		
Black	599 (6.3%)	10,434 (12.6%)	0.218	606 (6.3%)	0.002	795 (7.7%)	2,819 (10.3%)	0.092	747 (6.9%)	0.028		
Others	683 (7.1%)	7,847 (9.5%)	0.084	685 (7.1%)	0.000	751 (7.3%)	4,292 (15.7%)	0.267	727 (6.7%)	0.020		
Calendar year of initiating, n (%)												
2008	527 (5.5%)	7,583 (9.2%)	0.140	524 (5.5%)	0.002	288 (2.8%)	4,280 (15.7%)	0.456	285 (2.6%)	0.008		
2009	590 (6.2%)	10,474 (12.6%)	0.223	587 (6.1%)	0.002	433 (4.2%)	5,860 (21.4%)	0.534	429 (4.0%)	0.010		
2010	775 (8.1%)	10,400 (12.6%)	0.147	773 (8.1%)	0.002	557 (5.4%)	5,094 (18.6%)	0.416	551 (5.1%)	0.012		
2011	1,108 (11.6%)	10,762 (13.0%)	0.043	1,100 (11.5%)	0.004	923 (8.9%)	3,113 (11.4%)	0.082	914 (8.5%)	0.015		
2012	1,361 (14.2%)	11,361 (13.7%)	0.015	1,364 (14.2%)	0.001	1,410 (13.6%)	1,691 (6.2%)	0.251	1,383 (12.8%)	0.023		
2013	1,674 (17.5%)	11,471 (13.8%)	0.101	1,701 (17.7%)	0.006	1,984 (19.2%)	2,164 (7.9%)	0.333	2,105 (19.6%)	0.010		
2014	1,713 (17.9%)	11,373 (13.7%)	0.115	1,719 (17.9%)	0.000	2,296 (22.2%)	2,686 (9.8%)	0.342	2,451 (22.8%)	0.014		
2015	1,813	9,425	0.213	1,827	0.002	2,464 (23.8%)	2,457	0.408	2,650	0.019		

	(19.0%)	(11.4%)		(19.0%)			(9.0%)		(24.6%)	
Eye comorbidities, n (%)										
Retinopathy	1,025 (10.7%)	11,734 (14.2%)	0.104	1,032 (10.8%)	0.001	1,382 (13.3%)	3,447 (12.6%)	0.022	1,402 (13.0%)	0.010
Age-related macular degeneration	885 (9.3%)	10,975 (13.2%)	0.127	886 (9.2%)	0.001	951 (9.2%)	3,074 (11.2%)	0.068	935 (8.7%)	0.018
Retinal detachment and defects	153 (1.6%)	1,168 (1.4%)	0.016	151 (1.6%)	0.002	176 (1.7%)	399 (1.5%)	0.019	178 (1.7%)	0.003
Other retinal disorders	1,561 (16.3%)	13,871 (16.7%)	0.011	1,568 (16.3%)	0.000	1,702 (16.4%)	4,098 (15.0%)	0.040	1,796 (16.7%)	0.007
Cataract	5,439 (56.9%)	42,068 (50.8%)	0.123	5,457 (56.9%)	0.000	5,817 (56.2%)	14,983 (54.8%)	0.028	6,095 (56.6%)	0.009
Glaucoma	2,374 (24.8%)	22,038 (26.6%)	0.041	2,402 (25.0%)	0.005	2,554 (24.7%)	7,619 (27.9%)	0.073	2,662 (24.7%)	0.001
Other eye diseases§	4,514 (47.2%)	39,448 (47.6%)	0.008	4,536 (47.3%)	0.001	4,863 (47.0%)	12,722 (46.5%)	0.009	5,067 (47.1%)	0.002
Diabetes comorbidities, n (%)										
Nephropathy	1,031 (10.8%)	13,331 (16.1%)	0.156	1,030 (10.7%)	0.001	1,332 (12.9%)	2,382 (8.7%)	0.134	1,367 (12.7%)	0.005
Neuropathy	2,497 (26.1%)	23,903 (28.9%)	0.061	2,515 (26.2%)	0.002	3,106 (30.0%)	5,622 (20.6%)	0.218	3,332 (30.9%)	0.021
Cardiovascul										
ar										
comorbidities,										
n (%)	8,797	77,018		8,833			24,663		10,018	
Hypertension	(92.0%)	(93.0%)	0.036	(92.1%)	0.002	9,589 (92.6%)	(90.2%)	0.086	(93.0%)	0.017
Dyslipidemia	8,742 (91.4%)	69,448 (83.8%)	0.233	8,785 (91.6%)	0.005	9,436 (91.1%)	23,736 (86.8%)	0.138	9,852 (91.5%)	0.013
Coronary artery disease	3,560 (37.2%)	41,977 (50.7%)	0.273	3,569 (37.2%)	0.001	3,596 (34.7%)	8,592 (31.4%)	0.070	3,681 (34.2%)	0.011

Cerebrovascul ar disease	1,629 (17.0%)	25,924 (31.3%)	0.338	1,622 (16.9%)	0.003	1,728 (16.7%)	4,991 (18.3%)	0.041	1,811 (16.8%)	0.004
Peripheral vascular disease	1,632 (17.1%)	23,533 (28.4%)	0.273	1,633 (17.0%)	0.001	1,689 (16.3%)	4,630 (16.9%)	0.017	1,732 (16.1%)	0.006
Congestive Heart Failure Other	1,501 (15.7%)	28,941 (34.9%)	0.454	1,494 (15.6%)	0.003	NA	NA	NA	NA	NA
comorbidities,										
n (%)										
Chronic										
obstructive	1,543	23,423	0.295	1,550	0.000	1,408 (13.6%)	3,539	0.019	1,464	0.000
pulmonary	(16.1%)	(28.3%)	0.293	(16.2%)	0.000	1,408 (13.0%)	(12.9%)	0.019	(13.6%)	0.000
disease										
Depression	1,570	19,073	0.166	1,568	0.002	1,838 (17.7%)	3,443	0.144	1,944	0.008
•	(16.4%) 1,636	(23.0%) 18,537		(16.3%) 1,632			(12.6%) 4,544		(18.1%) 1,814	
Cancer	(17.1%)	(22.4%)	0.133	(17.0%)	0.003	1,767 (17.1%)	4,344 (16.6%)	0.012	(16.8%)	0.006
Chronic	,			, ,			· · · ·			
kidney	2,327	36,390	0.422	2,340	0.001	2,593 (25.0%)	6,032	0.070	2,709	0.003
disease¶	(24.3%)	(43.9%)		(24.4%)			(22.1%)		(25.2%)	
Co-										
medications,										
n (%)	6.060	44.222		7.016			10.726		7.202	
Metformin	6,969 (72.9%)	44,333 (53.5%)	0.410	7,016 (73.1%)	0.005	7,038 (68.0%)	18,736 (68.5%)	0.012	7,303 (67.8%)	0.003
	5,695	49,977		5,831			15,461		5,195	
SU	(59.6%)	(60.3%)	0.015	(60.8%)	0.025	5,036 (48.6%)	(56.5%)	0.159	(48.2%)	0.008
TZD	2,180	14,537	0.121	2,237	0.012	NT A II	27,345	NT A II		NTAH
TZD	(22.8%)	(17.5%)	0.131	(23.3%)	0.012	NA	(100.0%)	NA	NA	NA
DPP4i	3,594	20,581	0.278	3,716	0.024	3,301 (31.9%)	5,532	0.268	3,660	0.045
D11+1	(37.6%)	(24.8%)	0.270	(38.7%)	0.024		(20.2%)	0.200	(34.0%)	0.043
GLP1RA	9,561 (100.0%)	NA	NA	NA	NA	10,355 (100.0%)	NA	NA	NA	NA
LAI	NA	82,849 (100.0%)	NA	NA	NA	4,229 (40.8%)	4,006 (14.6%)	0.612	4,657 (43.2%)	0.049
Alpha	148 (1.5%)	979 (1.2%)	0.032	154 (1.6%)	0.005	132 (1.3%)	269 (1.0%)	0.028	188 (1.7%)	0.039

glucodase inhibitor										
Meglitinide	374 (3.9%)	3,846 (4.6%)	0.036	393 (4.1%)	0.009	326 (3.1%)	869 (3.2%)	0.002	333 (3.1%)	0.003
ACE inhibitors	4,401 (46.0%)	40,539 (48.9%)	0.058	4,419 (46.1%)	0.001	4,849 (46.8%)	13,504 (49.4%)	0.051	4,996 (46.4%)	0.009
ARBs	3,532 (36.9%)	22,644 (27.3%)	0.207	3,576 (37.3%)	0.007	3,838 (37.1%)	8,196 (30.0%)	0.151	4,070 (37.8%)	0.015
Beta-blockers	5,002 (52.3%)	49,548 (59.8%)	0.151	5,032 (52.4%)	0.003	5,325 (51.4%)	12,904 (47.2%)	0.085	5,596 (52.0%)	0.011
CCBs	3,289 (34.4%)	33,556 (40.5%)	0.126	3,318 (34.6%)	0.004	3,634 (35.1%)	9,706 (35.5%)	0.008	3,724 (34.6%)	0.011
Statins	7,230 (75.6%)	56,132 (67.8%)	0.175	7,254 (75.6%)	0.000	7,882 (76.1%)	19,024 (69.6%)	0.148	8,134 (75.5%)	0.013
Loop diuretics	2,403 (25.1%)	33,119 (40.0%)	0.321	2,415 (25.2%)	0.001	2,164 (20.9%)	3,979 (14.6%)	0.167	2,350 (21.8%)	0.023
Other diuretics	4,172 (43.6%)	30,603 (36.9%)	0.137	4,201 (43.8%)	0.003	4,414 (42.6%)	10,821 (39.6%)	0.062	4,643 (43.1%)	0.010
Fenofibrate	1,035 (10.8%)	5,797 (7.0%)	0.135	1,062 (11.1%)	0.008	1,138 (11.0%)	2,170 (7.9%)	0.104	1,195 (11.1%)	0.003
Any drugs may induce retinopathy or macular edema**	1,741 (18.2%)	18,794 (22.7%)	0.111	1,758 (18.3%)	0.003	1,685 (16.3%)	4,448 (16.3%)	0.000	1,866 (17.3%)	0.028
Health care utilizations, n										
(%)										
No. of hyperglycemi a diagnosis										
0	4,270 (44.7%)	31,322 (37.8%)	0.140	4,258 (44.4%)	0.006	3,947 (38.1%)	13,788 (50.4%)	0.250	3,958 (36.8%)	0.028
1	1,312 (13.7%)	12,410 (15.0%)	0.036	1,311 (13.7%)	0.002	1,283 (12.4%)	3,548 (13.0%)	0.018	1,330 (12.4%)	0.001
2	833 (8.7%)	7,993 (9.6%)	0.032	843 (8.8%)	0.003	898 (8.7%)	2,163 (7.9%)	0.028	889 (8.3%)	0.015

SHIPPI	EMENTA	ARYD	$\Delta T \Delta$
		$\mathbf{M}$	

≥3	3,146 (32.9%)	31,124 (37.6%)	0.098	3,182 (33.2%)	0.006	4,227 (40.8%)	7,846 (28.7%)	0.257	4,591 (42.6%)	0.037
No. of hospitalizatio ns due to diabetes										
0	9,521 (99.6%)	78,850 (95.2%)	0.279	9,554 (99.6%)	0.001	10,270 (99.2%)	27,037 (98.9%)	0.031	10,692 (99.3%)	0.014
1	39 (0.4%)	3,660 (4.4%)	0.264	40 (0.4%)	0.001	76 (0.7%)	282 (1.0%)	0.032	71 (0.7%)	0.009
≥2 N 6FD	NTSR	339 (0.4%)	0.087	NTSR	0.000	NTSR	26 (0.1%)	0.003	NTSR	0.018
No. of ED visit due to diabetes										
0	9,393 (98.2%)	75,432 (91.0%)	0.324	9,426 (98.2%)	0.000	10,071 (97.3%)	26,434 (96.7%)	0.034	10,467 (97.2%)	0.003
1	151 (1.6%)	6,111 (7.4%)	0.283	152 (1.6%)	0.000	245 (2.4%)	756 (2.8%)	0.025	253 (2.4%)	0.001
≥2	17 (0.2%)	1,306 (1.6%)	0.150	17 (0.2%)	0.000	39 (0.4%)	155 (0.6%)	0.028	48 (0.4%)	0.010
Physician encounters										
0	76 (0.8%)	4,173 (5.0%)	0.254	75 (0.8%)	0.001	95 (0.9%)	612 (2.2%)	0.106	103 (1.0%)	0.004
1-3	567 (5.9%)	8,828 (10.7%)	0.172	554 (5.8%)	0.007	564 (5.4%)	2,750 (10.1%)	0.173	583 (5.4%)	0.002
4-6	1,499 (15.7%)	12,005 (14.5%)	0.033	1,479 (15.4%)	0.007	1,585 (15.3%)	5,502 (20.1%)	0.126	1,559 (14.5%)	0.023
≥7	7,419 (77.6%)	57,843 (69.8%)	0.177	7,486 (78.0%)	0.010	8,111 (78.3%)	18,481 (67.6%)	0.244	8,523 (79.2%)	0.020
ED visit (any										
reason)	6,808	35,073		6,859			18,947		7,581	
0	(71.2%)	(42.3%)	0.609	(71.5%)	0.006	7,348 (71.0%)	(69.3%)	0.037	(70.4%)	0.012
1	1,561 (16.3%)	17,823 (21.5%)	0.133	1,554 (16.2%)	0.003	1,768 (17.1%)	4,728 (17.3%)	0.006	1,918 (17.8%)	0.019
≥2	1,192	29,953	0.575	1,181	0.005	1,239 (12.0%)	3,670	0.044	1,269	0.006

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	(12.5%)	(36.2%)		(12.3%)			(13.4%)		(11.8%)	
Flu vaccine	6,193 (64.8%)	47,641 (57.5%)	0.150	6,217 (64.8%)	0.001	6,683 (64.5%)	16,084 (58.8%)	0.118	7,014 (65.1%)	0.013
Low income subsidy	2,572 (26.9%)	36,133 (43.6%)	0.355	2,578 (26.9%)	0.001	2,803 (27.1%)	10,864 (39.7%)	0.271	2,792 (25.9%)	0.026
Lab results#										
$HbA1c\dagger\dagger$										
<7%	3,080	23,885	0.073	3,051	0.009	2,741 (26.5%)	9,316	0.166	2,803	0.010
(53mmol/mol)	(32.2%)	(28.8%)		(31.8%)			(34.1%)		(26.0%)	
7-9% (53-75	4,601	35,146	0.115	4,647	0.007	5,029 (48.6%)	12,890	0.037	5,221	0.005
mmol/mol)	(48.1%)	(42.4%)		(48.5%)			(47.1%)		(48.5%)	
>9%	1,879	23,817	0.214	1,891	0.002	2,585 (25.0%)	5,138	0.150	2,740	0.013
(75mmol/mol)	(19.7%)	(28.7%)		(19.7%)			(18.8%)		(25.5%)	
$SBP\dagger\dagger$										
120 **	3,591	31,795	0.042	3,600	0.001	4,036 (39.0%)	9,233	0.111	4,234	0.009
<130 mmHg	(37.6%)	(38.4%)		(37.5%)			(33.8%)		(39.3%)	
130-139	3,232	23,570	0.116	3,238	0.002	3,310 (32.0%)	8,427	0.040	3,388	0.012
mmHg	(33.8%)	(28.5%)		(33.8%)			(30.8%)		(31.5%)	
1.40	2,738	27,484	0.099	2,751	0.002	3,009 (29.1%)	9,686	0.137	3,141	0.008
>=140 mmHg	(28.7%)	(33.2%)		(28.7%)			(35.4%)		(29.2%)	
$DBP\dagger\dagger$										
.00	5,680	52,952	0.093	5,688	0.002	6,209 (60.0%)	15,905	0.053	6,434	0.009
<80 mmHg	(59.4%)	(63.9%)		(59.3%)			(58.2%)		(59.8%)	
00.00	3,310	23,503	0.135	3,326	0.002	3,419 (33.0%)	8,469	0.052	3,581	0.009
80-89 mmHg	(34.6%)	(28.4%)		(34.7%)			(31.0%)		(33.3%)	
. 00 11	572 (6.0%)	6,395	0.074	575 (6.0%)	0.002	727 (7.0%)	2,971	0.136	749 (7.0%)	0.006
>=90 mmHg		(7.7%)					(10.9%)			
LDL- $C$ ††										
100 / 11	7,220	62,906	0.027	7,238	0.002	7,717 (74.5%)	18,975	0.115	8,076	0.013
$< 100 \ mg/dl$	(75.5%)	(75.9%)		(75.5%)			(69.4%)		(75.0%)	
100 120 / 11	1,512	12,253	0.032	1,518	0.003	1,647 (15.9%)	5,021	0.065	1,692	0.008
100-129 mg/dl	(15.8%)	(14.8%)		(15.8%)			(18.4%)		(15.7%)	
> 120 / 11	829 (8.7%)	7,690	0.031	832 (8.7%)	0.001	990 (9.6%)	3,348	0.087	995 (9.2%)	0.012
≥130 mg/dl		(9.3%)					(12.2%)			

Abbreviations: No, number; DPP4i, dipeptidyl peptidase-4 inhibitors; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP1RA, Glucagon-like peptide-1 receptor agonist; LAI, long acting insulin; ACE inhibitors, Angiotension-converting enzyme inhibitors; ARB, angiotension receptor blockers; CCBs,

calcium-channel blockers; ED, emergency department; NA, not applicable. HbA1c, hemoglobin A1c; SBP, systolic blood pressure; DBP, diastolic blood pressure; LDL-C, low-density lipoprotein cholesterol; NTSR: numbers too small (<11) to report based on Center for Medicare and Medicaid Services (CMS) rules and data use agreement.

\*The comparisons were defined by use of IBT and PS-weighted comparator. Covariates were measured in 12 months before cohort entry including the index date (New users appear to 100% have the treatment at baseline). Initiation defined as having no prescriptions of either drug class during the 12 months prior to initiation.

† The size of the population for a specific drug differed across cohorts because of the requirement not to have been treated prior to index date with the comparator drug class (Figure S1).

‡Weighted by standardizing to their distribution in incretin-based therapy initiators by using weights of one for incretin-based therapy initiators and the odds of the estimated propensity score for comparator initiators.

§Other eye disease included disorders of globe (ICD-9-CM 360), chorioretinal inflammation (ICD-9-CM 363), disorder of the iris or ciliary body (ICD-9-CM 364), visual disturbance (ICD-9-CM 368), keratitis (ICD-9-CM 370), corneal disorders (ICD-9-CM 371), disorders of the conjunctiva (ICD-9-CM 372), inflammation of eyelid (ICD-9-CM 373), other disorder of eyelid (ICD-9-CM 374), disorder of lacrimal system (ICD-9-CM 375), disorder of orbit (ICD-9-CM 376), optic nerve disorder (ICD-9-CM 377), strabismus (ICD-9-CM 378), and other disorders of eye (ICD-9-CM 379).

||Patients with congestive baseline heart failure were excluded for GLP1RA vs TZD and DPP4i vs TZD comparison; and patients are required not to have been treated prior to index date with the comparator drug class.

¶ Diabetic nephropathy codes (250.40-250.43) were not included to identify chronic kidney disease (ICD-9-CM codes: 016.0; 095.4; 189.0; 189.9; 223.0; 236.91; 271.4; 274.1; 283.11; 403; 404; 440.1; 442.1; 572.4; 581-588; 591; 753.12-753.19; 753.2; 794.4).

\*\* Drugs may induce diabetic retinopathy or macular edema included tamoxifen, quinine, chloroquine, hydroxychloroquine, mefloquine, digoxin, ethambutol, peginterferonalfa 2a, peginterferonalfa 2b, interferon alfa-2b, interferon alfa n3, interferon alfacon 1, interferon beta 1a, interferon alfa 1b, isocarboxazid, sildenafil, isotretinoin, vigabatrin, fingolimod, doxetaxel, niacin, and latanoprost (ophthalmic).

#Based on the measure closest to index date.

††For clinical measures, the distribution of covariates and standardized difference were the mean of results from multiple imputation (20 iterations) as each iteration produces different number of patients with each level of clinical measure, e.g.HbA1c <7% (53mmol/mol), 7-9% (53-75mmol/mol), >9% (75mmol/mol). Availability and distribution of clinical measures were shown in Table 1.

Supplementary Table 5. Crude and adjusted hazard ratios for advanced diabetic requiring treatment associated with use of incretin-based therapies compared with therapeutic alternatives based on multiple imputation of clinical measures (Hemoglobin A1c, blood pressure, and low-density lipoprotein cholesterol)\*†;.

Comparison	Cohort	No. of Patient	Median duration (yr) of treatment (IQR)	Person-yr	No. of Advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathy requiring treatment rate per 1,000 patient-yr	Crude HR (95% CI)	PS weighting § HR (95% CI)
DPP4i vs SU	DPP4i	39,292	0.75 (0.41-1.67)	50,222	349	6.9 (6.3-7.7)	1.10 (0.97-1.25)	0.94 (0.81-1.09)
DI I 41 V\$ 50	SU	87,073	0.87 (0.42-2.01)	129,099	772	6.0 (5.6-6.4)	1.00 (reference)	1.00 (reference)
DDD4: TGD	DPP4i	51,410	0.80 (0.41-1.70)	67,327	520	7.7 (7.1-8.4)	0.85 (0.73-0.98)	0.92 (0.74-1.15)
DPP4i vs TZD	TZD	22,231	0.74 (0.41-1.52)	26,984	253	9.4 (8.3-10.6)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	9,561	0.59 (0.41-1.21)	9,462	66	7.0 (5.5-8.9)	0.49 (0.39-0.63)	0.54 (0.42-0.71)
LAI	LAI	82,849	0.67 (0.41-1.66)	106,699	1,368	12.8 (12.2-13.5)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	10,355	0.58 (0.41-1.17)	9,895	122	10.7 (9.2-12.4)	1.16 (0.94-1.42)	0.76 (0.53-1.10)
TZD	TZD	27,345	0.78 (0.42-1.57)	34,232	334	7.6 (6.9-8.3)	1.00 (reference)	1.00 (reference)

Abbreviations: Yr, year; ADRT, advanced diabetic retinopathy requiring treatment; IQR, interquartile range; HR, hazard ratio; PS, propensity score; CI, confidence interval; DPP4i, dipeptidyl peptidase-4 inhibitors; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP1RA, Glucagon-like peptide-1 receptor agonist; LAI, long acting insulin.

§Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based therapy initiators. The presented HR is obtained by pooling PS weighted HRsacross the 20 adjusted HRs using log transformation.

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

<sup>†</sup>The distribution of covariates and standardized difference of are shown in Table S3, S4. Availability and distribution of clinical measures are shown in Table 1. ‡We conducted MI (20 iterations) using fully conditional specification with logistic regression for clinical variables (HbA1c, SBP, DBP, LDL) in arbitrary missing pattern allowing generalized logit model for nominal response data as proportional odds assumption was violated.

Supplementary Table 6. Crude and adjusted hazard ratios for advanced diabetic retinopathy requiring treatment associated with use of incretin-based therapies compared with therapeutic alternatives according to Hemoglobin A1c tertiles\*†‡.

Stratum	Comparison	Cohort	No. of Patients	Median duration (yr) of treatment (IQR)	Person -yr	No. of Advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathyrate per 1,000 person- yr	Crude HR (95% CI)	PS weighting § HR (95% CI)
HbA1c tertiles†									
	DDD4: CII	DPP4i	17,155	0.80 (0.41-1.77)	22,895	61	2.7 (2.1-3.4)	0.98 (0.66-1.46)	0.85 (0.55-1.32)
	DPP4i vs SU	SU	38,589	0.88 (0.42-2.06)	58,346	153	2.6 (2.2-3.1)	1.00 (reference)	1.00 (reference)
	DDD4: T7D	DPP4i	17,024	0.81 (0.41-1.77)	22,990	112	4.9 (4.0-5.8)	0.73 (0.48-1.09)	0.85 (0.48-1.48)
<7%	DPP4i vs TZD	TZD	7,863	0.75 (0.41-1.56)	9,759	67	6.9 (5.4-8.7)	1.00 (reference)	1.00 (reference)
(53mmol/mol)	GLP1RA vs	GLP1RA	3,080	0.58 (0.41-1.20)	3,088	16	5.1 (3.1-8.3)	0.51 (0.25-1.06)	0.45 (0.21-0.94)
	LAI	LAI	23,885	0.60 (0.41-1.51)	29,004	260	9.0 (7.9-10.1)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	2,741	0.59 (0.41-1.18)	2,682	19	7.0 (4.5-10.9)	0.97 (0.50-1.91)	0.77 (0.24-2.46)
	TZD	TZD	9,316	0.80 (0.44-1.61)	12,023	77	6.4 (5.1-8.0)	1.00 (reference)	1.00 (reference)
	DPP4i vs SU	DPP4i	15,078	0.75 (0.41-1.66)	19,190	162	8.4 (7.2-9.8)	1.17 (0.92-1.49)	0.99 (0.75-1.30)
		SU	32,919	0.90 (0.46-2.07)	49,925	338	6.8 (6.1-7.5)	1.00 (reference)	1.00 (reference)
		DPP4i	24,629	0.81 (0.41-1.69)	32,157	266	8.3 (7.3-9.3)	0.91 (0.71-1.16)	0.99 (0.70-1.41)
7-9 % (53-75	DPP4i vs TZD	TZD	10,080	0.74 (0.41-1.52)	12,226	114	9.3 (7.8-11.2)	1.00 (reference)	1.00 (reference)
mmol/mol)	GLP1RA vs	GLP1RA	4,601	0.60 (0.41-1.23)	4,599	28	6.1 (4.2-8.8)	0.54 (0.34-0.84)	0.58 (0.37-0.91)
	LAI	LAI	35,146	0.72 (0.41-1.78)	47,377	486	10.3 (9.4-11.2)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	5,029	0.59 (0.41-1.18)	4,862	59	12.2 (9.4-15.7)	1.13 (0.74-1.73)	0.75 (0.39-1.45)
	TZD	TZD	12,890	0.79 (0.43-1.56)	16,096	161	10.0 (8.6-11.7)	1.00 (reference)	1.00 (reference)
	DPP4i vs SU	DPP4i	7,059	0.67 (0.41-1.48)	8,137	126	15.5 (13.0-18.5)	1.08 (0.79-1.49)	0.93 (0.65-1.32)
	DPP41 VS SU	SU	15,565	0.79 (0.41-1.77)	20,828	282	13.5 (12.0-15.2)	1.00 (reference)	1.00 (reference)
	DPP4i vs TZD	DPP4i	9,758	0.76 (0.41-1.63)	12,180	143	11.7 (10.0-13.8)	0.85 (0.60-1.21)	0.88 (0.56-1.39)
>9% (75	DI 1 41 VS 1ZD	TZD	4,288	0.72 (0.41-1.46)	4,999	72	14.3 (11.3-18.0)	1.00 (reference)	1.00 (reference)
mmol/mol)	GLP1RA vs	GLP1RA	1,879	0.58 (0.41-1.17)	1,776	22	12.6 (8.3-19.1)	0.55 (0.33-0.91)	0.58 (0.35-0.96)
	LAI	LAI	23,817	0.68 (0.41-1.65)	30,318	622	20.5 (19.0-22.2)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	2,585	0.58 (0.41-1.11)	2,351	44	18.7 (13.9-25.2)	1.08 (0.68-1.72)	0.77 (0.36-1.65)
	TZD	TZD	5,138	0.74 (0.41-1.50)	6,113	96	15.8 (12.9-19.3)	1.00 (reference)	1.00 (reference)

Abbreviations: Hemoglobin A1c, HbA1c; Yr, year; IQR, interquartile range; HR, hazard ratio; PS, propensity score; CI, confidence interval; DPP-4 inhibitor; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP, GLP-1 receptor agonist; LAI, long acting insulin; NTSR: numbers too small (<11) to report based on Center for Medicare and Medicaid Services (CMS) rules and data use agreement.

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

† The distribution of covariates and standardized difference of HbA1c are shown in Table S3, S4. Availability and distribution of HbA1c are shown in Table 1.

‡We conducted MI (20 iterations) using fully conditional specification with logistic regression for clinical variables (HbA1c, SBP, DBP, LDL) in arbitrary missing pattern allowing generalized logit model for nominal response data as proportional odds assumption was violated.

§Propensity score weighted HR were standardized to the distribution of baseline covariates inincretin-based therapy initiators. As each iteration produces different number of patients with HbA1c <7% (53mmol/mol), 7-9% (53-75mmol/mol), >9% (75mmol/mol), we reported the mean of sample size, median duration of treatment, person-year, number of events, rate, and the pooled crude HR and pooled PS weighted HR across the 20 estimates using log transformation.

Supplementary Table 7. Crude and adjusted hazard ratios for advanced diabetic retinopathy requiring treatment associated with use of incretin-based therapies compared with therapeutic alternatives according to presence or not of hypertension and use of angiotension-converting enzyme inhibitors or angiotension receptor blockeratcohort entry\*.

Stratum	Compari son	Cohort	No. of Patients	Median duration (yr) of treatment (IQR)	Person- yr	No. of advanced diabetic retinopathy requiring treatment Events	Advanced diabetic retinopathy requiring treatmentrate per 1,000 person-yr	Crude HR (95% CI)	PS weighting† HR (95% CI)
Hypertension									
	DPP4i vs	DPP4i	3,053	0.78 (0.41-1.70)	3,989	29	7.3 (5.0-10.5)	0.81 (0.54-1.22)	0.82 (0.53-1.29)
	SU	SU	7,901	0.85 (0.46-2.07)	11,961	102	8.5 (7.0-10.4)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	4,094	0.79 (0.41-1.72)	5,421	50	9.2 (7.0-12.2)	0.85 (0.55-1.33)	1.12 (0.62-2.03)
No pre-existing	TZD	TZD	2,272	0.78 (0.43-1.62)	2,896	32	11.0 (7.8-15.7)	1.00 (reference)	1.00 (reference)
hypertension	GLP1RA	GLP1RA	764	0.58 (0.41-1.16)	762	NTSR	5.3 (2.0-14.0)	0.25 (0.09-0.67)	0.34 (0.12-0.95)
	vs LAI	LAI	5,831	0.70 (0.41-1.72)	7,810	145	18.6 (15.7-21.9)	1.00 (reference)	1.00 (reference)
	GLP1RA	GLP1RA	766	0.58 (0.41-1.04)	705	NTSR	9.9 (4.7-21.0)	0.72 (0.33-1.57)	0.98 (0.40-2.38)
	vs TZD	TZD	2,682	0.82 (0.50-1.68)	3,537	43	12.2 (9.0-16.4)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	36,239	0.75 (0.41-1.67)	46,233	320	6.9 (6.2-7.7)	1.14 (1.00-1.31)	0.92 (0.80-1.06)
	$\mathbf{SU}$	SU	79,172	0.87 (0.42-2.00)	117,138	670	5.7 (5.3-6.2)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	47,316	0.80 (0.41-1.70)	61,906	470	7.6 (6.9-8.3)	0.85 (0.73-1.00)	0.91 (0.74-1.12)
With pre-existing	TZD	TZD	19,959	0.74 (0.41-1.51)	24,088	221	9.2 (8.0-10.5)	1.00 (reference)	1.00 (reference)
Hypertension	GLP1RA	GLP1RA	8,797	0.59 (0.41-1.21)	8,701	62	7.1 (5.6-9.1)	0.53 (0.41-0.68)	0.53 (0.40-0.68)
	vs LAI	LAI	77,018	0.67 (0.41-1.66)	98,889	1,223	12.4 (11.7-13.1)	1.00 (reference)	1.00 (reference)
	GLP1RA	GLP1RA	9,589	0.58 (0.41-1.17)	9,190	115	12.5 (10.4-15.0)	1.21 (0.98-1.50)	0.75 (0.53-1.08)
	vs TZD	TZD	24,663	0.77 (0.41-1.56)	30,695	291	9.5 (8.4-10.6)	1.00 (reference)	1.00 (reference)
ACE inhibitors/AR B									
	DPP4i vs	DPP4i	10,550	0.69 (0.41-1.54)	12,746	73	5.7 (4.6-7.2)	0.90 (0.70-1.18)	0.76 (0.58-1.01)
	SU	SU	27,578	0.82 (0.41-1.91)	39,472	235	6.0 (5.2-6.8)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	12,722	0.76 (0.41-1.65)	16,190	103	6.4 (5.2-7.7)	0.72 (0.53-0.98)	0.81 (0.54-1.21)
No baseline ACE	TZD	TZD	6,152	0.70 (0.41-1.44)	7,259	66	9.1 (7.1-11.6)	1.00 (reference)	1.00 (reference)
inhibitors/ARB	GLP1RA	GLP1RA	2,171	0.58 (0.41-1.10)	2,024	16	7.9 (4.8-12.9)	0.51 (0.31-0.84)	0.49 (0.29-0.82)
	vs LAI	LAI	24,304	0.62 (0.41-1.50)	29,041	398	13.7 (12.4-15.1)	1.00 (reference)	1.00 (reference)
	GLP1RA	GLP1RA	2,204	0.58 (0.41-1.10)	2,040	23	11.3 (7.5-17.0)	1.08 (0.68-1.70)	0.79 (0.39-1.63)
	vs TZD	TZD	7,251	0.73 (0.41-1.49)	8,760	83	9.5 (7.6-11.8)	1.00 (reference)	1.00 (reference)
With baseline ACE	DPP4i vs	DPP4i	28,742	0.77 (0.41-1.73)	37,477	276	7.4 (6.5-8.3)	1.16 (1.01-1.34)	0.96 (0.82-1.12)

inhibitors/ARB	SU	SU	59,495	0.90 (0.44-2.06)	89,627	537	6.0 (5.5-6.5)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	38,688	0.81 (0.41-1.72)	51,137	417	8.2 (7.4-9.0)	0.88 (0.74-1.05)	0.96 (0.76-1.20)
	TZD	TZD	16,079	0.75 (0.41-1.55)	19,725	187	9.5 (8.2-10.9)	1.00 (reference)	1.00 (reference)
	GLP1RA	GLP1RA	7,390	0.60 (0.41-1.24)	7,438	50	6.7 (5.1-8.9)	0.49 (0.37-0.66)	0.51 (0.38-0.68)
	vs LAI	LAI	58,545	0.70 (0.41-1.73)	77,657	970	12.5 (11.7-13.3)	1.00 (reference)	1.00 (reference)
	GLP1RA	GLP1RA	8,151	0.58 (0.41-1.18)	7,855	99	12.6 (10.3-15.4)	1.17 (0.93-1.48)	0.73 (0.49-1.07)
	vs TZD	TZD	20,094	0.81 (0.45-1.59)	25,472	251	9.9 (8.7-11.2)	1.00 (reference)	1.00 (reference)

Abbreviations: Yr, year; IQR, interquartile range; HR, hazard ratio; PS, propensity score; CI, confidence interval; DPP4i, DPP-4 inhibitor; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP, GLP-1 receptor agonist; LAI, long acting insulin; angiotension-converting enzyme inhibitors, ACEI; ARB, angiotension receptor blocker; NTSR: numbers too small (<11) to report based on Center for Medicare and Medicaid Services (CMS) rules and data use agreement.

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

<sup>†</sup>Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based therapy initiators.

Supplementary Table 8. Crude and adjusted hazard ratios for advanced diabetic retinopathy requiring treatments sociated with use of individual incretin-based therapy compared with the rapeutic alternatives \*†.

Stratum	Comparison	Cohort	No. of Patients	Median duration (yr) of treatment (IQR)	Person- yr	No. of Advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathy requiring treatmentrate per 1,000 person-yr	Crude HR (95% CI)	PS weighting† HR (95% CI)
DPP4i†									
	Sitagliptin vs	Sitagliptin	29,613	0.76 (0.41-1.72)	39,064	266	6.8 (6.0-7.7)	1.09 (0.95-1.26)	0.91 (0.79-1.06)
	SU	SU	87,073	0.87 (0.42-2.01)	129,099	772	6.0 (5.6-6.4)	1.00 (reference)	1.00 (reference)
	Saxagliptin vs	Saxagliptin	5,251	0.91 (0.46-2.05)	7,411	44	5.9 (4.4-8.0)	0.95 (0.70-1.29)	0.88 (0.64-1.20)
DPP4i vs SU	SU	SU	87,073	0.87 (0.42-2.01)	129,099	772	6.0 (5.6-6.4)	1.00 (reference)	1.00 (reference)
D1141 V8 50	Linagliptin vs	Linagliptin	4,259	0.58 (0.38-1.15)	3,614	38	10.5 (7.6-14.5)	1.40 (1.01-1.95)	0.97 (0.68-1.37)
	SU	SU	87,073	0.87 (0.42-2.01)	129,099	772	6.0 (5.6-6.4)	1.00 (reference)	1.00 (reference)
	Alogliptin vs	Alogliptin	158	0.58 (0.41-1.06)	120	NTSR	NA	NA	NA
	SU	SU	87,073	0.87 (0.42-2.01)	129,099	772	6.0 (5.6-6.4)	1.00 (reference)	1.00 (reference)
	Sitagliptin vs	Sitagliptin	39,020	0.82 (0.41-1.75)	52,920	401	7.6 (6.9-8.4)	0.84 (0.72-0.99)	0.91 (0.75-1.10)
	TZD	TZD	22,231	0.74 (0.41-1.52)	26,984	253	9.4 (8.3-10.6)	1.00 (reference)	1.00 (reference)
	Saxagliptin vs	Saxagliptin	6,847	0.91 (0.50-2.01)	9,670	62	6.4 (5.0-8.2)	0.71 (0.54-0.93)	0.80 (0.58-1.10)
DPP4i vs	TZD	TZD	22,231	0.74 (0.41-1.52)	26,984	253	9.4 (8.3-10.6)	1.00 (reference)	1.00 (reference)
TZD	Linagliptin vs	Linagliptin	5,395	0.58 (0.41-1.18)	4,630	55	11.9 (9.1-15.5)	1.12 (0.83-1.50)	1.17 (0.77-1.78)
	TZD	TZD	22,231	0.74 (0.41-1.52)	26,984	253	9.4 (8.3-10.6)	1.00 (reference)	1.00 (reference)
	Alogliptin vs	Alogliptin	132	0.54 (0.41-0.87)	88	NTSR	11.4 (1.6-81.5)	0.97 (0.14-6.93)	1.52 (0.21-11.21)
	TZD	TZD	22,231	0.74 (0.41-1.52)	26,984	253	9.4 (8.3-10.6)	1.00 (reference)	1.00 (reference)
GLP1RA†									
	Exenatide vs	Exenatide	3,862	0.59 (0.41-1.21)	4,127	25	6.1 (4.1-9.0)	0.44 (0.30-0.66)	0.44 (0.30-0.65)
	LAI	LAI	82,849	0.67 (0.41-1.66)	106,699	1,368	12.8 (12.2-13.5)	1.00 (reference)	1.00 (reference)
	Liraglutide vs	Liraglutide	5,420	0.61 (0.41-1.25)	5,250	41	7.8 (5.7-10.6)	0.55 (0.40-0.75)	0.57 (0.41-0.78)
GLP1RA vs	LAI	LAI	82,849	0.67 (0.41-1.66)	106,699	1,368	12.8 (12.2-13.5)	1.00 (reference)	1.00 (reference)
LAI	Albiglutide vs	Albiglutide	111	0.35 (0.16-0.52)	39	NTSR	NA	NA	NA
	LAI	LAI	82,849	0.67 (0.41-1.66)	106,699	1,368	12.8 (12.2-13.5)	1.00 (reference)	1.00 (reference)
	Dulaglutide vs	Dulaglutide	166	0.24 (0.12-0.40)	45	NTSR	NA	NA	NA
	LAI	LAI	82,849	0.67 (0.41-1.66)	106,699	1,368	12.8 (12.2-13.5)	1.00 (reference)	1.00 (reference)
	Exenatide vs	Exenatide	3,567	0.58 (0.41-1.14)	3,700	33	8.9 (6.3-12.6)	0.87 (0.61-1.24)	0.62 (0.42-0.93)
GLP1RA vs	TZD	TZD	27,345	0.78 (0.42-1.57)	34,232	334	9.8 (8.8-10.9)	1.00 (reference)	1.00 (reference)
TZD	Liraglutide vs	Liraglutide	6,395	0.61 (0.41-1.23)	6,069	88	14.5 (11.8-17.9)	1.35 (1.07-1.71)	0.84 (0.56-1.24)
	TZD	TZD	27,345	0.78 (0.42-1.57)	34,232	334	9.8 (8.8-10.9)	1.00 (reference)	1.00 (reference)

Albiglutide vs	Albiglutide	169	0.35 (0.18-0.51)	62	NTSR	16.1 (2.3-114.5)	1.15 (0.16-8.23)	0.71 (0.08-6.06)
TZD	TZD	27,345	0.78 (0.42-1.57)	34,232	334	9.8 (8.8-10.9)	1.00 (reference)	1.00 (reference)
Dulaglutide vs	Dulaglutide	221	0.26 (0.13-0.41)	63	NTSR	NA	NA	NA
TZD	TZD	27,345	0.78 (0.42-1.57)	34,232	334	9.8 (8.8-10.9)	1.00 (reference)	1.00 (reference)

Abbreviations: Yr, year; IQR, interquartile range; HR, hazard ratio; PS, propensity score; CI, confidence interval; DPP4i, DPP-4 inhibitor; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP, GLP-1 receptor agonist; LAI, long acting insulin; NA, not applicable; NTSR: numbers too small (<11) to report based on Center for Medicare and Medicaid Services (CMS) rules and data use agreement.

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

<sup>†</sup>Patients initiated two incretin-based threapies in the same class (e.g. sitagliptin and saxagliptin) on the same day were excluded. Patients were censored when switching from one incretin-based therapy to another incretin-based therapy in the same class (e.g. from sitagliptin to saxagliptin).

<sup>‡</sup>Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based therapy initiators.

Supplementary Table 9. Crude and adjusted hazard ratios for advanced retinopathy requiring treatment associated with use of incretin-based therapies compared with therapeutic alternatives for various latency period\*.

Latency period†	Comparison	Cohort	No. of Patient	Median duration (yr) of treatment (IQR)	Person-yr	No. of advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathy requiring treatmentrate per 1,000 patient-yr	Crude HR (95% CI)	PS weighting† HR (95% CI)
	DPP4i vs SU	DPP4i	39,292	0.70 (0.33-1.63)	48,313	335	6.9 (6.2-7.7)	1.12 (0.98-1.27)	0.93 (0.81-1.06)
	DPP4I VS SU	SU	87,072	0.82 (0.39-1.97)	124,984	733	5.9 (5.5-6.3)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	51,410	0.74 (0.37-1.66)	64,937	497	7.7 (7.0-8.4)	0.87 (0.74-1.01)	0.94 (0.76-1.15)
0-day	TZD	TZD	22,231	0.67 (0.33-1.46)	25,602	233	9.1 (8.0-10.4)	1.00 (reference)	1.00 (reference)
latency	GLP1RA vs	GLP1RA	9,561	0.53 (0.33-1.15)	8,944	65	7.3 (5.7-9.3)	0.51 (0.40-0.66)	0.52 (0.40-0.67)
	LAI	LAI	82,846	0.62 (0.33-1.63)	103,173	1,317	12.8 (12.1-13.5)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	10,355	0.53 (0.33-1.12)	9,395	115	12.2 (10.2-14.7)	1.18 (0.95-1.46)	0.83 (0.58-1.18)
	TZD	TZD	27,345	0.73 (0.40-1.50)	32,620	310	9.5 (8.5-10.6)	1.00 (reference)	1.00 (reference)
	DPP4i vs SU	DPP4i	39,292	0.81 (0.50-1.72)	52,076	360	6.9 (6.2-7.7)	1.07 (0.95-1.22)	0.89 (0.78-1.02)
	DPP41 VS SU	SU	87,073	0.92 (0.50-2.05)	133,096	811	6.1 (5.7-6.5)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	51,410	0.85 (0.50-1.75)	69,649	542	7.8 (7.1-8.5)	0.85 (0.73-0.98)	0.90 (0.74-1.09)
60-day	TZD	TZD	22,231	0.81 (0.50-1.59)	28,344	267	9.4 (8.4-10.6)	1.00 (reference)	1.00 (reference)
latency	GLP1RA vs	GLP1RA	9,561	0.66 (0.50-1.26)	9,966	69	6.9 (5.5-8.8)	0.49 (0.38-0.62)	0.50 (0.39-0.64)
	LAI	LAI	82,849	0.73 (0.50-1.70)	110,101	1,423	12.9 (12.3-13.6)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	10,355	0.66 (0.50-1.21)	10,376	128	12.3 (10.4-14.7)	1.15 (0.94-1.41)	0.74 (0.53-1.02)
	TZD	TZD	27,345	0.84 (0.50-1.63)	35,816	351	9.8 (8.8-10.9)	1.00 (reference)	1.00 (reference)
	DPP4i vs SU	DPP4i	39,292	0.86 (0.58-1.77)	53,873	377	7.0 (6.3-7.7)	1.08 (0.96-1.22)	0.90 (0.79-1.03)
	DPP41 VS SU	SU	87,073	0.99 (0.58-2.09)	136,981	838	6.1 (5.7-6.5)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	51,410	0.91 (0.58-1.80)	71,904	553	7.7 (7.1-8.4)	0.84 (0.72-0.97)	0.88 (0.73-1.07)
90-day	TZD	TZD	22,231	0.87 (0.58-1.65)	29,684	279	9.4 (8.4-10.6)	1.00 (reference)	1.00 (reference)
latency	GLP1RA vs	GLP1RA	9,561	0.74 (0.57-1.32)	10,457	71	6.8 (5.4-8.6)	0.48 (0.38-0.61)	0.49 (0.38-0.63)
	LAI	LAI	82,849	0.77 (0.57-1.74)	113,390	1,477	13.0 (12.4-13.7)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	10,355	0.74 (0.57-1.26)	10,840	132	12.2 (10.3-14.5)	1.14 (0.94-1.40)	0.73 (0.53-1.00)
	TZD	TZD	27,345	0.91 (0.58-1.69)	37,373	365	9.8 (8.8-10.8)	1.00 (reference)	1.00 (reference)
	DPP4i vs SU	DPP4i	39,292	1.03 (0.75-1.91)	58,966	419	7.1 (6.5-7.8)	1.10 (0.98-1.24)	0.91 (0.81-1.03)
	(88 888 88 888 88 888 88 88 88 88 88 88	SU	87,073	1.14 (0.82-2.22)	148,018	908	6.1 (5.7-6.5)	1.00 (reference)	1.00 (reference)
180-day	DPP4i vs	DPP4i	51,410	1.07 (0.82-1.93)	78,303	608	7.8 (7.2-8.4)	0.82 (0.72-0.94)	0.86 (0.72-1.02)
latency	TZD	TZD	22,231	1.07 (0.82-1.83)	33,587	321	9.6 (8.6-10.7)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	9,561	0.96 (0.69-1.48)	11,858	82	6.9 (5.6-8.6)	0.49 (0.39-0.62)	0.51 (0.41-0.64)
	LAI	LAI	82,849	0.99 (0.72-1.85)	122,650	1,605	13.1 (12.5-13.7)	1.00 (reference)	1.00 (reference)

GLP1RA vs	GLP1RA	10,355	0.93 (0.64-1.41)	12,144	142	11.7 (9.9-13.8)	1.10 (0.91-1.34)	0.68 (0.50-0.93)
TZD	TZD	27,345	1.09 (0.82-1.86)	41,892	409	9.8 (8.9-10.8)	1.00 (reference)	1.00 (reference)

Abbreviations: Yr, year; IQR, interquartile range; HR, hazard ratio; PS, propensity score; CI, confidence interval; DPP, DPP-4 inhibitor; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP, GLP-1 receptor agonist; LAI, long acting insulin.

†Latency period is defined as the period allowing for retinopathy events to occur after censoring for treatment changes.

†Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based therapy initiators.

<sup>\*</sup>Analysis based on as treated exposure definition.

Supplementary Table 10. Crude and adjusted hazard ratios for advanced diabetic retinopathy associated with use of incretin-based therapies compared with therapeutic alternatives based on initial treatment analysis\*.

Comparison	nrison Cohort No. of Patient		Median duration (yr) of treatment (IQR)	Person-yr	No. of advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathyrate per 1,000 patient- yr	Crude HR (95% CI)	PS weighting† HR (95% CI)
DPP4i vs SU	DPP4i	39,292	2.24 (0.94-3.00)	76,664	532	6.9 (6.4-7.6)	1.08 (0.97-1.20)	0.89 (0.80-1.00)
D1141 VS 50	SU	87,073	2.48 (1.05-3.00)	177,577	1,131	6.4 (6.0-6.8)	1.00 (reference)	1.00 (reference)
DPP4i vs	DPP4i	51,410	2.17 (0.94-3.00)	99,372	788	7.9 (7.4-8.5)	0.87 (0.77-0.97)	0.89 (0.77-1.04)
TZD	TZD	22,231	3.00 (1.57-3.00)	51,432	454	8.8 (8.0-9.7)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	9,561	2.13 (0.89-3.00)	18,217	128	7.0 (5.9-8.4)	0.53 (0.44-0.64)	0.55 (0.45-0.66)
LAI	LAI	82,849	1.95 (0.73-3.00)	151,157	2,006	13.3 (12.7-13.9)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	10,355	1.68 (0.66-3.00)	17,626	200	11.3 (9.9-13.0)	1.18 (1.00-1.38)	0.75 (0.58-0.98)
TZD	TZD	27,345	3.00 (1.39-3.00)	61,317	563	9.2 (8.4-10.0)	1.00 (reference)	1.00 (reference)

Abbreviations: Yr, year; IQR, interquartile range; HR, hazard ratio; PS, propensity score; CI, confidence interval; DPP4i, dipeptidyl peptidase-4 inhibitors; SU, Sulfonylurea; TZD, Thiazolidinedione; GLP1RA, Glucagon-like peptide-1 receptor agonist; LAI, long acting insulin.

†Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based threapy initiators.

<sup>\*</sup>Initial treatment analysis is defined as completely ignoring treatment changes during follow-up (this mimics the intention-to-treat analysis in a randomized trial and is equivalent to an indefinite latent period). The follow-up ends with the earliest of the following events: 3 years after initiation, death, end of enrolment for Medicare Parts A, B, end of study (Sep 30, 2015), or a claim for retinopathy treatment. Patients initiated the therapy on the day of outcome occurrence, death, end of Medicare part A,B, end of study (9/30/2015) were excluded when estimating HR.

Supplementary Table 11. Crude and adjusted hazard ratios for advanced diabetic retinopathy treatment associated with use of incretin-based therapies compared with therapeutic alternatives based on modified primary outcome\*†.

Comparison	Cohort	No. of Patient	Median duration (yr) of treatment (IQR)	Person- yr	No. of advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathy ate per 1,000 patient-yr	Crude HR (95% CI)	PS weighting‡ HR (95% CI)
DPP4i vs SU	DPP4i	39,292	0.75 (0.41-1.68)	50,241	330	6.6 (5.9-7.3)	1.11 (0.98-1.27)	0.92 (0.80-1.06)
DFF41 V\$ 50	SU	87,073	0.87 (0.42-2.01)	129,173	719	5.6 (5.2-6.0)	1.00 (reference)	1.00 (reference)
DDD4' . TZD	DPP4i	51,410	0.80 (0.41-1.70)	67,368	479	7.1 (6.5-7.8)	0.81 (0.69-0.94)	0.87 (0.71-1.06)
DPP4i vs TZD	TZD	22,231	0.74 (0.41-1.52)	26,992	244	9.0 (8.0-10.3)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	9,561	0.59 (0.41-1.21)	9,463	62	6.6 (5.1-8.4)	0.48 (0.37-0.62)	0.50 (0.38-0.65)
LAI	LAI	82,849	0.67 (0.41-1.66)	106,742	1,326	12.4 (11.8-13.1)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	10,355	0.58 (0.41-1.17)	9,900	117	11.8 (9.8-14.2)	1.15 (0.93-1.42)	0.76 (0.53-1.07)
TZD	TZD	27,345	0.78 (0.42-1.57)	34,243	322	9.4 (8.4-10.5)	1.00 (reference)	1.00 (reference)

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

<sup>†</sup> Outcome is defined as a diabetic retinopathy diagnosis in the primary, secondary, or third position within the same claim of the procedures including photocoagulation, intravitreal injection of anti-vascular endothelial growth factor agent or steroid, or vitrectomy.

<sup>‡</sup> Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based therapy initiators.

Supplementary Table 12. Crude and adjusted hazard ratios for advanced diabetic retinopathy requiring treatment associated with use of incretin-based therapies compared with therapeutic alternatives after restricting to patients who had an eye exam during follow-up\*.

Comparison	Cohort	No. of Patient	Median duration (yr) of treatment (IQR)	Person-yr	No. of advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathy requiring treatment rate per 1,000 patient-yr	Crude HR (95% CI)	PS weighting† HR (95% CI)
DPP4i vs SU	DPP4i	17,379	1.40 (0.66-2.73)	32,698	226	6.9 (6.1-7.9)	1.16 (0.99-1.36)	0.90 (0.76-1.08)
	SU	40,076	1.66 (0.79-3.14)	86,919	489	5.6 (5.1-6.1)	1.00 (reference)	1.00 (reference)
DPP4i vs	DPP4i	24,174	1.37 (0.66-2.65)	44,885	349	7.8 (7.0-8.6)	0.93 (0.76-1.16)	1.09 (0.83-1.42)
TZD	TZD	7,149	1.39 (0.67-2.58)	13,421	111	8.3 (6.9-10.0)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	3,674	1.04 (0.53-2.02)	5,408	37	6.8 (5.0-9.5)	0.51 (0.36-0.70)	0.53 (0.38-0.75)
LAI	LAI	36,633	1.46 (0.64-2.90)	72,781	904	12.4 (11.6-13.3)	1.00 (reference)	1.00 (reference)
GLP1RA vs TZD	GLP1RA	4,433	0.94 (0.49-1.83)	5,887	75	12.7 (10.1-16.0)	1.24 (0.95-1.63)	0.87 (0.57-1.35)
	TZD	9,735	1.35 (0.67-2.54)	18,040	166	9.2 (7.9-10.7)	1.00 (reference)	1.00 (reference)

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

<sup>†</sup> Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based therapy initiators.

Supplementary Table 13.Crude and adjusted hazard ratios for advanced diabetic retinopathy requiring treatment associated with use of incretin-based therapies compared with therapeutic alternatives after censoring patients receiving long acting insulin during follow-up\*.

Comparison	Cohort	No. of Patient	(vr) of treatment		No. of Advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathy requiring treatmentper 1,000 patient-yr	Crude HR (95% CI)	PS weighting† HR (95% CI)
DPP4i vs SU	DPP4i	39,292	0.58 (0.24-1.37)	41,610	195	4.7 (4.1-5.4)	0.94 (0.79-1.10)	0.83 (0.70-0.99)
	SU	87,073	0.69 (0.41-1.75)	113,858	532	4.7 (4.3-5.1)	1.00 (reference)	1.00 (reference)
DPP4i vs	DPP4i	51,410	0.59 (0.34-1.40)	56,300	358	6.4 (5.7-7.1)	0.84 (0.70-1.00)	0.94 (0.74-1.19)
TZD	TZD	22,231	0.58 (0.41-1.32)	23,314	181	7.8 (6.7-9.0)	1.00 (reference)	1.00 (reference)
GLP1RA vs TZD	GLP1RA	10,355	0.41 (0.11-0.73)	6,461	59	9.1 (7.1-11.8)	0.95 (0.72-1.26)	0.88 (0.58-1.31)
	TZD	27,345	0.61 (0.41-1.36)	29,566	246	8.3 (7.3-9.4)	1.00 (reference)	1.00 (reference)

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

<sup>†</sup> Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based therapy initiators.

Supplementary Table 14. Crude and adjusted hazard ratios for advanced diabetic retinopathy requiring treatment associated with use of incretin-based therapies compared with therapeutic alternatives after censoring patients receiving medications that may induce or worsen diabetic retinopathy, or slow the progression of retinopathy (fenofibrate)\*†.

Comparison	Cohort	No. of Patient	Median duration (yr) of treatment (IQR)	Person-yr	No. of Advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathy requiring treatment rate per 1,000 patient-yr	Crude HR (95% CI)	PS weighting‡ HR (95% CI)
DPP4i vs SU	DPP4i	39,292	0.50 (0.19-1.18)	37,001	280	7.6 (6.7-8.5)	1.07 (0.92-1.23)	0.88 (0.75-1.02)
	SU	87,073	0.58 (0.23-1.42)	95,651	641	6.7 (6.2-7.2)	1.00 (reference)	1.00 (reference)
DPP4i vs	DPP4i	51,410	0.58 (0.25-1.27)	51,403	433	8.4 (7.7-9.3)	0.83 (0.71-0.98)	0.91 (0.74-1.13)
TZD	TZD	22,231	0.58 (0.31-1.19)	21,230	220	10.4 (9.1-11.8)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	9,561	0.41 (0.18-0.91)	7,203	63	8.7 (6.8-11.2)	0.55 (0.43-0.71)	0.57 (0.44-0.74)
LAI	LAI	82,849	0.45 (0.16-1.10)	77,184	1,118	14.5 (13.7-15.4)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	10,355	0.43 (0.20-0.88)	7,609	108	14.2 (11.7-17.2)	1.23 (0.99-1.53)	0.92 (0.65-1.30)
TZD	TZD	27,345	0.58 (0.34-1.23)	26,835	282	10.5 (9.3-11.8)	1.00 (reference)	1.00 (reference)

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

<sup>†</sup> Drugs may induce diabetic retinopathy or macular edema include tamoxifen, quinine, chloroquine, hydroxychloroquine, mefloquine, digoxin, ethambutol, peginterferonalfa 2a, peginterferonalfa 2b, interferon alfa-2b, interferon alfa n3, interferon alfacon 1, interferon beta 1a, interferon alfa 1b, isocarboxazid, sildenafil, isotretinoin, vigabatrin, fingolimod, doxetaxel, niacin, and latanoprost (ophthalmic).

<sup>‡</sup>Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based therapy initiators.

Supplementary Table 15. Crude and adjusted hazard ratios for advanced diabetic retinopathy associated with use of IBTs compared with therapeutic alternatives based multivariate Cox regression model\*.

Comparison	Cohort	No. of Patient	Median duration (yr) of treatment (IQR)	Person-yr	No. of Advanced diabetic retinopathy requiring treatment events	Advanced diabetic retinopathy rate per 1,000 patient-yr	Crude HR (95% CI)	Adjusted† HR (95% CI)
DPP4i vs SU	DPP4i	39,292	0.75 (0.41-1.67)	50,222	349	6.9 (6.3-7.7)	1.10 (0.97-1.25)	0.96 (0.84-1.10)
DFF41 VS 30	SU	87,073	0.87 (0.42-2.01)	129,099	772	6.0 (5.6-6.4)	1.00 (reference)	1.00 (reference)
DPP4i vs	DPP4i	51,410	0.80 (0.41-1.70)	67,327	520	7.7 (7.1-8.4)	0.85 (0.73-0.98)	0.86 (0.73-1.01)
TZD	TZD	22,231	0.74 (0.41-1.52)	26,984	253	9.4 (8.3-10.6)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	9,561	0.59 (0.41-1.21)	9,462	66	7.0 (5.5-8.9)	0.49 (0.39-0.63)	0.51 (0.39-0.65)
LAI	LAI	82,849	0.67 (0.41-1.66)	106,699	1,368	12.8 (12.2-13.5)	1.00 (reference)	1.00 (reference)
GLP1RA vs	GLP1RA	10,355	0.58 (0.41-1.17)	9,895	122	12.3 (10.3-14.7)	1.16 (0.94-1.42)	0.94 (0.75-1.19)
TZD	TZD	27,345	0.78 (0.42-1.57)	34,232	334	9.8 (8.8-10.9)	1.00 (reference)	1.00 (reference)

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

<sup>†</sup>Adjusted HRs from multivariate Cox regression model were based on original population without weighting.

Supplementary Table 16. Crude and adjusted hazard ratios for incident diabetic retinopathy associated with use of incretin-based therapy compared with therapeutic alternatives based on secondary outcome\*†.

Analysis†	Comparison	Cohort	No. of Patient	Median duration (yr) of treatment (IQR)	Person-yr	No. of incident diabetic retinopathy events	Incident diabetic retinopathy rate per 1,000 patient- yr	Crude HR (95% CI)	PS weighting† HR (95% CI)
	DPP4i vs SU	DPP4i	34,737	0.63 (0.33-1.49)	39,578	2,349	59.4 (56.9-61.9)	1.14 (1.08-1.19)	0.97 (0.92-1.02)
	DFF41 VS SU	SU	78,916	0.74 (0.33-1.82)	105,961	5,284	49.9 (48.5-51.3)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	45,316	0.66 (0.33-1.50)	52,753	3,331	63.1 (61.0-65.4)	0.92 (0.87-0.98)	0.95 (0.87-1.03)
0-day	TZD	TZD	19,520	0.59 (0.33-1.32)	20,689	1,456	70.4 (66.7-74.2)	1.00 (reference)	1.00 (reference)
latency§	GLP1RA vs	GLP1RA	8,536	0.50 (0.33-1.05)	7,443	501	67.3 (61.5-73.6)	0.61 (0.56-0.67)	0.62 (0.57-0.68)
	LAI	LAI	71,112	0.50 (0.33-1.36)	76,870	7,722	100.5 (98.1-102.9)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	8,973	0.50 (0.33-1.00)	7,528	681	90.5 (83.7-97.8)	1.13 (1.03-1.23)	0.87 (0.76-0.99)
	TZD	TZD	23,898	0.63 (0.33-1.37)	26,142	1,910	73.1 (69.8-76.5)	1.00 (reference)	1.00 (reference)
	DPP4i vs SU	DPP4i	34,737	0.67 (0.41-1.54)	41,183	2,501	60.7 (58.3-63.2)	1.14 (1.09-1.20)	0.97 (0.93-1.03)
	DPP41 VS SU	SU	78,917	0.80 (0.41-1.86)	109,486	5,564	50.8 (49.5-52.2)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	45,316	0.71 (0.41-1.55)	54,745	3,537	64.6 (62.5-66.8)	0.92 (0.87-0.98)	0.96 (0.88-1.03)
30-day	TZD	TZD	19,520	0.66 (0.41-1.39)	21,825	1,574	72.1 (68.5-75.9)	1.00 (reference)	1.00 (reference)
latency§	GLP1RA vs	GLP1RA	8,536	0.58 (0.41-1.11)	7,881	549	69.7 (63.9-75.9)	0.62 (0.57-0.68)	0.63 (0.58-0.69)
	LAI	LAI	71,115	0.58 (0.41-1.40)	79,635	8,165	102.5 (100.2-104.9)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	8,973	0.58 (0.41-1.06)	7,939	722	90.9 (84.3-98.1)	1.11 (1.02-1.21)	0.85 (0.75-0.97)
	TZD	TZD	45134	0.69 (0.41-1.43)	52053	3746	72.0 (69.6-74.4)	1.00 (reference)	1.00 (reference)
	DPP4i vs SU	DPP4i	34,737	0.74 (0.50-1.58)	42,734	2,632	61.6 (59.2-64.1)	1.14 (1.09-1.20)	0.97 (0.93-1.02)
	DFF41 V8 SU	SU	78,917	0.84 (0.50-1.90)	112,893	5,802	51.4 (50.1-52.8)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	45,316	0.75 (0.50-1.59)	56,670	3,709	65.4 (63.3-67.7)	0.91 (0.86-0.97)	0.95 (0.88-1.03)
60-day	TZD	TZD	19,520	0.72 (0.50-1.44)	22,935	1,687	73.6 (70.0-77.3)	1.00 (reference)	1.00 (reference)
latency§	GLP1RA vs	GLP1RA	8,536	0.65 (0.46-1.16)	8,304	595	71.7 (66.0-77.8)	0.63 (0.58-0.69)	0.64 (0.59-0.70)
	LAI	LAI	71,115	0.66 (0.46-1.43)	82,274	8,527	103.6 (101.3-106.0)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	8,973	0.64 (0.48-1.11)	8,330	771	92.6 (86.0-99.6)	1.12 (1.03-1.21)	0.86 (0.76-0.97)
	TZD	TZD	23,898	0.74 (0.50-1.48)	28,741	2,174	75.6 (72.4-79.0)	1.00 (reference)	1.00 (reference)
		DPP4i	34,737	0.79 (0.56-1.63)	44,228	2,734	61.8 (59.5-64.2)	1.14 (1.09-1.19)	0.97 (0.92-1.02)
	DPP4i vs SU	SU	78,917	0.90 (0.58-1.94)	116,188	6,010	51.7 (50.4-53.1)	1.00 (reference)	1.00 (reference)
90-day	DPP4i vs	DPP4i	45,316	0.82 (0.58-1.63)	58,527	3,860	66.0 (63.8-68.1)	0.91 (0.86-0.96)	0.93 (0.86-1.00)
latency§	TZD	TZD	19,520	0.77 (0.58-1.50)	24,020	1,784	74.3 (70.8-77.9)	1.00 (reference)	1.00 (reference)
<b>,</b> 0	GLP1RA vs	GLP1RA	8,536	0.71 (0.50-1.22)	8,712	624	71.6 (66.1-77.6)	0.63 (0.58-0.68)	0.64 (0.59-0.70)
	LAI	LAI	71,115	0.72 (0.50-1.47)	84,802	8,862	104.5 (102.2-106.8)	1.00 (reference)	1.00 (reference)
		27.11	, 1,113	0.72 (0.50 1.17)	01,002	5,002	10.10 (102.2 100.0)	1.55 (151616160)	1.55 (1616161166)

	GLP1RA vs	GLP1RA	8,973	0.68 (0.50-1.17)	8,704	816	93.7 (87.3-100.7)	1.13 (1.04-1.22)	0.85 (0.75-0.96)
	TZD	TZD	23,898	0.82 (0.58-1.54)	29,996	2,277	75.9 (72.8-79.2)	1.00 (reference)	1.00 (reference)
	DDD4: GH	DPP4i	34,737	0.99 (0.66-1.76)	48,429	3,020	62.4 (60.1-64.7)	1.15 (1.10-1.20)	0.98 (0.93-1.02)
	DPP4i vs SU	SU	78,917	1.05 (0.76-2.06)	125,481	6,526	52.0 (50.7-53.3)	1.00 (reference)	1.00 (reference)
	DPP4i vs	DPP4i	45,316	0.99 (0.71-1.77)	63,743	4,257	66.8 (64.8-68.9)	0.92 (0.87-0.97)	0.94 (0.88-1.01)
190 day	TZD	TZD	19,520	0.99 (0.82-1.68)	27,149	2,011	74.1 (70.8-77.5)	1.00 (reference)	1.00 (reference)
180-day latency§	GLP1RA vs	GLP1RA	8,536	0.90 (0.59-1.39)	9,865	709	71.9 (66.7-77.5)	0.64 (0.59-0.69)	0.65 (0.60-0.70)
rateric y ş	LAI	LAI	71,115	0.88 (0.51-1.58)	91,796	9,659	105.2 (103.0-107.5)	1.00 (reference)	1.00 (reference)
	GLP1RA vs	GLP1RA	8,973	0.84 (0.52-1.32)	9,739	909	93.3 (87.3-99.8)	1.13 (1.05-1.22)	0.88 (0.78-0.99)
	TZD	TZD	23,898	0.99 (0.82-1.72)	33,598	2,538	75.5 (72.6-78.6)	1.00 (reference)	1.00 (reference)

<sup>\*</sup>Analysis based on as treated exposure definition, latency period is 30 days.

<sup>†</sup>Our secondary outcome is incident diabetic retinopathy identified by diagnosis (ICD-9-CM 362.0X). Patients with baseline diabetic retinopathy were excluded in this analysis.

<sup>‡</sup>Propensity score weighted HR were standardized to the distribution of baseline covariates in incretin-based therapy initiators. \$Latency period is defined as the period allowing for retinopathy events to occur after censoring for treatment changes.